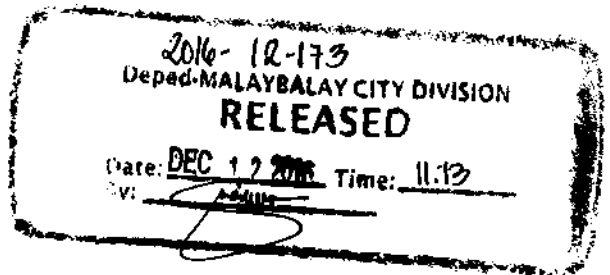




Department of Education
Region X-Northern Mindanao
DIVISION OF MALAYBALAY CITY
Casisang, Malaybalay City



DIVISION MEMORANDUM
No. 672, s. 2016



TO: Chief Education Supervisors and Staff– CID and SGOD
Elementary and Secondary School Heads
Public and Private Schools
This Division

FROM: 
EDILBERTO L. OPLENARIA, CESO VI
Schools Division Superintendent

DATE: December 9, 2016

SUBJECT: SUBMISSION OF 2017 METROBANK-MTAP-DEPED MATH CHALLENGE
REGISTRATION FORM (MMC FORM No. I)

1. This Office hereby requires all Public and Private schools to submit an accomplished Registration Form (MMC FORM No. I) of the 2017 Metrobank-MTAP-DepEd Math Challenge-Elimination Round on February 16, 2017 for Elementary Level and February 17, 2016 for Secondary Level.
2. Further, comply the prescribed form in two copies. One will be retained as your school file to be presented during the elimination round and the other one to be submitted to this Office, Attention: Imelda S. Bentillo, EPS in Mathematics on or before December 20, 2016.
3. Venues shall be identified by the Division and District Supervisors and shall be announced later to the participating schools.
4. For information and compliance.



MMC

METROBANK-MTAP-DEPED MATH CHALLENGE

REGISTRATION FORM

(For both Public and Private Schools)

MMC Form No. 1



DepEd Division: _____ Region: _____

Name of School: _____ Contact No.: _____

School Address: _____ School Email: _____

Contact Person: _____ Position: _____ Contact No.: _____

Grade Level: _____

Name of Contestants:

1. _____

2. _____

3. _____

Name of Coach

1. _____

Grade Level: _____

Name of Contestants:

1. _____

2. _____

3. _____

Name of Coach

1. _____

Grade Level: _____

Name of Contestants:

1. _____

2. _____

3. _____

Name of Coach

1. _____

Grade Level: _____

Name of Contestants:

1. _____

2. _____

3. _____

Name of Coach

1. _____

Grade Level: _____

Name of Contestants:

1. _____

2. _____

3. _____

Name of Coach

1. _____

Grade Level: _____

Name of Contestants:

1. _____

2. _____

3. _____

Name of Coach

1. _____

I hereby certify the above mentioned contestants are bonafide students of our school:

Printed Name and Signature of the Principal



+632 912 5249
+632 709 0447
+632 898 8898



iccoronel_mtaphil@yahoo.com
mark.ravanzo@metrobank.com.ph



/MetrobankMathChallenge

IMPORTANT!

- Contestants must be actually enrolled in the grade level they are competing. In **NO** instance shall mixed grade level participation in team competition be allowed.
- Submit a photocopy of this registration form and the school identification cards of the contestants and the coaches to the DepEd Division Math Supervisor where your school is located on or before **December 12, 2016**.
- Present the original copy to the registration in-charge during the Elimination Round on **February 16, 2017** (Elementary) or **February 17, 2017** (High School). **This serves as your permit. No permit, no entry.**
- Ensure that your DepEd Division Math Supervisor will accomplish the MMC Form No. 2 via the MMC online portal on or before **January 13, 2017**.
- Competition venues will be determined by the DepEd Division Math Supervisors. Please inquire before the Elimination Round.
- This form may be photocopied for distribution as needed.
- You may also download this form at www.metrobankmathchallenge.com and FB page.

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