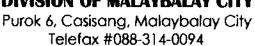


Republic of the Philippines Department of Education Region X

DIVISION OF MALAYBALAY CITY





2017-10-270 Deped=MALAYBALAY CITY DIVISIO:

DIVISION MEMO	RANDUM
---------------	--------

543 No. s. 2017

TO:

Chief Education Supervisors & Staff, CID & SGOD Public Elementary and Secondary School Heads

This Division

From:

EDILBERTÒ L. OPLENARIA, CESO VI

Schools Division Superintendent

Date:

October 19, 2017

Subject:

DISSEMINATION OF MEMORANDUM DM-CI-2017-00312

RE: PREPARATION FOR THE ACCREDITATION AND EQUIVALENCY

(A & E) TEST REGISTRATION

- Pursuant to Memorandum DM-C1-2017-0032, the field is hereby informed that the Department of Education (DepEd), through the Bureau of Assessment (BEA) will conduct the Accreditation and Equivalency (A & E) Test in two levels: elementary and junior high school by the month of November 2017.
- 2. Qualified applicants shall register to the Registration Officer Jasmin J. Adriatico LPT, Education Program Supervisor from October 2 to October 25, 2017.
- 3. For information, guidance and compliance.

Copy furnished: Records Unit

TO BE POSTED THE WEBSITE



Republic of the Philippines

Department of Education

Deprid Complex, Meralco Avenue, Pasig City, Philippines Direct Line: (632) 633-7202/687-4146 Fax: (632) 631-5057 E-mail: lorna.dino@deped.gov.ph Website: www.deped.gov.ph



Undersecretary for Curriculum and Instruction

MEMORANDUM DM-CI-2017-00312

To:

Bureau Directors

Directors of Services, Centers and Heads of Units

Regional Directors

Schools Division Superintendents

All Others Concerned

From:

LORNA DIG DINO, Ph.D.

Director IV

Officer-in-Charge, Office of the Undersecretary

for Curriculum and Instruction

Subject:

Preparation for the Accreditation and Equivalency (A&E) Test Registration

Date:

September 29, 2017

The Department of Education (DepEd), through the Bureau of Education Assessment (BEA) will conduct the Accreditation and Equivalency (A&E) Test in two levels: elementary and junior high school.

To ensure the smooth conduct of A&E Test registration, please refer to the table below for the procedures:

	CONDUCT OF A&E TEST REGISTRATION							
When to register? Where to register?		The registration period for the A&E Test is from October 2 to 25, 2017.						
		Schools Division Offices (SDOs) or District Offices (DOs) identified by the Schools Division Superintendent (SDS) shall serve as Registration Centers.						
3.	Who are qualified to register?	Applicants for A&E Test Elementary Level should be at least 12 years old and at least 16 years old for the Junior High School.						
		Pursuant to D.O. 55, s. 2016, the following may register: 1. Learners in the Alternative Learning System; a. 2016 ALS Program Completers b. Non-passers in the previous A&E Tests who completed ALS Program						

c. Those who completed ALS program but did not take the A&E Test in the previous test administration 2. Out of School Children and Youth who are prepared for assessment; and 3. Adults who are seeking for Certification of Learning. For those who wish to take A&E Test-Junior High School level without the elementary certificate, they shall be advised to take certification for elementary level first. 4. What are the documents Registration requirements are as follows: needed for registration? Original and Photocopy of Certification of ALS Program Completion issued by the Learning Facilitator* (For ALS Learners only) 2. Original and Photocopy of Birth Certificate (NSO/PSA); If copy of Birth Certificate from the Philippine Statistics Authority (formerly National Statistics Office) is not available, any of the following documents can be presented: i. **Baptismal Certificate;** ii. Voter's ID (with picture and signature); iii. Valid Passport; iv. Valid Driver's License; and Any legal document bearing the applicant's picture, name and signature (e.g. NBI Clearance, Barangay certificate, certification issued by barangay leaders/chieftain or learning facilitator) 4. Two 1x1 identical ID Photo (white background with name tag) *See Enclosure 1 5. How to register? The test applicant shall: go to the designated Registration Center and look for the Registration Committee to secure a registration form (Enclosure 2). 2. personally accomplish the Registration Form at the Registration Center. Please refer to Enclosure 3 for the detailed procedure in accomplishing the form. 3. present the accomplished Registration form, together with the complete requirements to the Registration Committee for evaluation of documents. receive the applicant's copy (lower portion of the registration form) for safekeeping and presentation to the examiner on the testing day.

In hard to reach/ far-flung areas, learning facilitators may gather applicants in one assembly and assist them in the registration. They shall secure the accomplished forms and the required documents for submission on behalf of the applicants to the Registration Committee in the SDO or DO. After the evaluation of documents, learning facilitators shall ensure safekeeping and distribution of all the applicants' copy to the examinees on or before the testing day.

NO PAYMENT SHALL BE COLLECTED by anyone involved in the A&E Test Registration, Administration and issuance of certificate of rating.

6. Who will manage the registration and how?

The Schools Division Superintendent (SDS) shall designate a **Registration Committee**, which consists of a Registration Officer, a co-registrar and a support staff. They should have experience in the conduct of BEA testing program. They will facilitate the registration process by doing the following:

- a. report to the Registration Center from October 2-18, 2017 from 8:00 a.m. to 5:00 p.m., including weekends.
- b. interview the prospective applicants to determine if they are qualified to register.
- c. distribute the registration forms to qualified applicants.
- d. explain how the registration form will be accomplished (but will not accomplish it for the applicant).
- check if registration forms are duly accomplished by the applicant, making sure that there are no blank spaces and errors in the form.
- f. certify that all information supplied in the registration form are based on the submitted requirements.
- g. report to the Division Testing Coordinator (DTC) any applicants with incomplete requirements or questionnable documents.
- h. fill out the name of the testing center in the registration form.
- detach the lower part of the registration form and returns it to the registrant for use as admission document on the testing day.
- prepare the masterlist of registrants for submission to the SDS (See Enclosure 4).
- k. sign and submit the list to the Division Testing Coordinator (DTC).

The DTC shall submit the list to BEA to prepare the national allocation of test materials. The submitted list should be signed by the Registration Officer, DTC and SDS.

		Expenses for the reproduction of registration forms shall be charged in the contingency funds as prepared in the budget estimates during the National Assessment Conference for A&E Test.
7.	Who else can help the registrants in the registration process and how?	ALS mobile Teachers and District ALS Coordinators/Focal persons in the Schools Division Offices (SDOs)/District Offices (DOs) may help in the dissemination of information and distribution of registration form. They are also requested to facilitate the issuance of Certificate of ALS Program Completion for ALS Learners.
8.	Who will monitor/supervise the registration?	The Regional Testing Coordinator (RTC) and the Division Testing Coordinator (DTC) will monitor the registration process in the SDOs and DOs.

Please submit the name of the **registration center**, its address, registration committee and their contact details to <u>bea.ead@deped.gov.ph</u> in this format signed by the DTC and certified true and correct by the SDS on or before October 27, 2017:

					Reg	istration	Committe	e	
Region	Division	Name of Division Registration Address Officer		-		egistrar	Suppo	ort Staff	
Center	Carre		Name	Contact Details	Name	Contact Details	Name	Contact Details	
]			

Also, kindly submit the name of the designated testing center/s, its/their address/es, chief examiner (school head), and his/her contact details in this format signed by the DTC and certified true and correct by the SDS on or before October 27, 2017:

Region	Division	Name of Testing Center (School)	Address	Chief Examiner	Mobile/ CP#	E-mail Address

Soft copy of enclosures of this memo will be sent to the DTCs thru e-mail by the Bureau of Education Assessment-Education Assessment Division. Enclosure 2- Registration form is for reproduction ASAP.

This serves as an advance information. A separate memo on test administration procedures shall also be issued.

Immediate dissemination of this memorandum is desired.



Republic of the Philippines	
Department of Education	
Division of	
Region	

CERTIFICATE OF ALS PROGRAM COMPLETION

This is to certify that	of
(Nате)	(Address)
has satisfactorily	y completed
	(Specify ALS Program Level Completed)
at	in
(Learning Center)	(Address of Learning Center)
on	
(Date of ALS Program Completion)	_
This certification is issued as one of the requ	irements for the Accreditation and
Equivalency (A&E) Test application.	
Signature over	Printed Name
	Facilitator

^{*}Not Valid Without the SDO Dry Seal

A&E Form 1	<u> </u>		<u>'</u>	\	Copy for Registra	BING OTHER
		Benublic a	f the Philips	nines	-	
1x1 ID Photo			nt of Educa			
with	BUREAL	,		SSESSMENT		
Name Tag				e., Pasig City 1600		
· —- · · · · · · · · · · · · · · · · · ·		_		- ·		
	ACCREDITATIO		EQUIVAI	LENCY (A&E) TES	Т	
rite Legibly. Put X on the	applicable items		Secie	stration Date		
the Euglisty. Cat it on the	Sumame		1110913	Given Nam	14	M.I.
				J., VB., (VB.,		1 1 1
					······································	<u></u>
Birthdate	Learner Referen	ice Numbe	r	Civil Status		Gender
tonth Day Year				Single Married	Separated	Male
	Home Address					Famale
	,				<u></u>	
lgion Division			Learning			
	1 (D) - 0 (6)	ť	Center	<u> </u>		
LS Program Completed	I (Mis. Specify)		, -			
			<u></u>	A&E Test Applying for		lary Level
· ·- · · · · · · · · · · · · · · · · ·					Junior H	ligh School
				he Registration Officer		
roof of Identity		Name and				
ontact Number		Testing Cer	ii ∉ f			
Carrie, Hant Lunkalana	of the independent access-	h	1	 		
	of the information supplied form based on the required		Continue	at all information in this form	ere TRUE and CO	ORRECT
	achments.	•	, county use	· - investabled the form	PER THUE BIND CI	
i <u></u>		_		Applicant's Signature Ove	r Printed Name	
Registration Officer's	Signature Over Printed Nar	ne				
						
equired Attachments	Proof of identity			Portfolio Rating Certificati	on *	
			. ⊨	_		
	ALS Program Certific	cation (if ar	(עי	Proof of Birth (NSO, Pa	assport, Any legai	Documents)
	ALS Program Ceram	cation (if ar	(עי	_		
\$E Form 1	IALS Program Certific	cation (if ar	(עי	_	Applicant's	
				Proof of Birth (NSO, Pa		
1x1 iO Photo		Republic o	t the Phillip	Proof of Birth (NSO, Pa		
1×1 iO Photo with		Republic o Departme	f the Philip	Proof of Birth (NSO, Pa		
1x1 iO Photo	BUREA	Republic o Departme U OF EDUI	f the Philip int of Educa CATION A	Proof of Birth (NSO, Pa		
1×1 iO Photo with	BUREA	Republic o Departme U OF EDUI	f the Philip int of Educa CATION A	Proof of Birth (NSO, Pa		
1x1 iO Photo with Name Tag	BUREA 2nd Fir., Bonif	Republic o Departme U OF EDU acio Bidg.,	f the Philip int of Educe CATION A! Meralco Av	Proof of Birth (NSO, Pa	Applicant's	
1x1 iO Photo with Name Tag	BUREA 2nd Fir., Bonif	Republic o Departme U OF EDU acio Bidg.,	f the Philip int of Educe CATION A! Meralco Av	Proof of Birth (NSO, Pa	Applicant's	
1x1 iO Photo with Name Tag	BUREA 2nd Fir., Bonif ACCREDITATIO	Republic o Departme U OF EDU acio Bidg.,	f the Philippint of Educa CATION A! Meralco A EQUIVA tration Form	Proof of Birth (NSO, Papines atton SSESSMENT re., Pasig City 1600	Applicant's	
1x1 iO Photo with Name Tag	BUREA 2nd Fir., Bonif ACCREDITATIO applicable tems.	Republic o Departme U OF EDU acio Bidg.,	f the Philippint of Educa CATION A! Meralco A EQUIVA tration Form	prines ation SSESSMENT re., Pasig City 1600 LENCY (A&E) TES	Applicant's	
1x1 iO Photo with Name Tag	BUREA 2nd Fir., Bonif ACCREDITATIO	Republic o Departme U OF EDU acio Bidg.,	f the Philippint of Educa CATION A! Meralco A EQUIVA tration Form	Proof of Birth (NSO, Papines atton SSESSMENT re., Pasig City 1600	Applicant's	Сору
1x1 iO Photo with Name Tag	BUREA 2nd Fir., Bonif ACCREDITATIO applicable tems.	Republic o Departme U OF EDU acio Bidg.,	f the Philippint of Educa CATION A! Meralco A EQUIVA tration Form	prines ation SSESSMENT re., Pasig City 1600 LENCY (A&E) TES	Applicant's	Сору
1x1 iO Photo with Name Tag	BUREA 2nd Fir., Bonif ACCREDITATIO applicable tems.	Republic o Departme U OF EDUI acio Bldg., IN AND Regis	f the Philip int of Educa CATION A! Meralco As EQUIVA tration Form	prines ation SSESSMENT re., Pasig City 1600 LENCY (A&E) TES	Applicant's	Сору
1×1 :O Photo with Name Tag rite Legibly. Put X on the Birthdate	BUREA 2nd Fir., Bonif ACCREDITATIO applicable tems. Surname	Republic o Departme U OF EDUI acio Bldg., IN AND Regis	f the Philip int of Educa CATION A! Meralco As EQUIVA tration Form	Proof of Birth (NSO, Papines atton SSESSMENT ve., Pasig City 1600 LENCY (A&E) TES stration Date Given Nam Civii Status	Applicant's	Copy
1x1 iD Photo with Name Tag	BUREA 2nd Fir., Bonif ACCREDITATIO applicable items. Surname Learner Referen	Republic o Departme U OF EDUI acio Bldg., IN AND Regis	f the Philip int of Educa CATION A! Meralco As EQUIVA tration Form	Proof of Birth (NSO, Papines atton SSESSMENT ve., Pasig City 1600 LENCY (A&E) TES stration Date Given Name	Applicant's	M.I.
1×1 :O Photo with Name Tag rite Legibly. Put X on the Birthdate	BUREA 2nd Fir., Bonif ACCREDITATIO applicable tems. Surname	Republic o Departme U OF EDUI acio Bldg., IN AND Regis	f the Philip int of Educa CATION A! Meralco As EQUIVA tration Form	Proof of Birth (NSO, Papines atton SSESSMENT ve., Pasig City 1600 LENCY (A&E) TES stration Date Given Nam Civii Status	Applicant's	M.I. Gender Maie
1x1 :0 Photo with Name Tag rite Legibly. Put X on the Birthdate onth Day Year	BUREA 2nd Fir., Bonif ACCREDITATIO applicable items. Surname Learner Referen	Republic o Departme U OF EDUI acio Bldg., IN AND Regis	f the Philippint of Education As Meralco As tration Form	Proof of Birth (NSO, Papines atton SSESSMENT ve., Pasig City 1600 LENCY (A&E) TES stration Date Given Nam Civii Status	Applicant's	M.I. Gender Maie
1x1 iO Photo with Name Tag Trite Legibly. Put X on the Birthdate lonth Day Year	BUREA 2nd Fir., Bonif ACCREDITATIO applicable items. Surname Learner Referen	Republic o Departme U OF EDUI acio Bldg., IN AND Regis	the Philippint of Education Air Regis	Proof of Birth (NSO, Papines atton SSESSMENT ve., Pasig City 1600 LENCY (A&E) TES stration Date Given Nam Civii Status	Applicant's	M.I. Gender Maie
1x1 iD Photo with Name Tag Trite Legibly. Put X on the Birthdate lonth Day Year	BUREA 2nd Fir., Bonif ACCREDITATIO applicable items. Surname Learner Referer Home Address	Republic o Departme U OF EDUI acio Bldg., IN AND Regis	f the Philippint of Education As Meralco As tration Form	Proof of Birth (NSO, Papines atton SSESSMENT ve., Pasig City 1600 LENCY (A&E) TES stration Date Given Nam Civii Status	Applicant's	M.I. Gender Maie
1x1 iD Photo with Name Tag Trite Legibly. Put X on the Birthdate lonth Day Year	BUREA 2nd Fir., Bonif ACCREDITATIO applicable items. Surname Learner Referer Home Address	Republic o Departme U OF EDUI acio Bldg., IN AND Regis	the Philippint of Education Air Regis	Proof of Birth (NSO, Papines atton SSESSMENT re., Pasig City 1600 LENCY (A&E) TES stration Date Given Nan Civil Status Single Married	Applicant's	M.i. Gender Maie Fernale
1x1 iO Photo with Name Tag rite Legibly. Put X on the Birthdate onth Day Year	BUREA 2nd Fir., Bonif ACCREDITATIO applicable items. Surname Learner Referer Home Address	Republic o Departme U OF EDUI acio Bldg., IN AND Regis	the Philippint of Education Air Regis	Proof of Birth (NSO, Papines atton SSESSMENT ve., Pasig City 1600 LENCY (A&E) TES stration Date Given Nam Civii Status	Applicant's T Separated Elemen	M.I. Gender Maie Fernale
1×1 :O Photo with Name Tag rite Legibly. Put X on the Birthdate onth Day Year	BUREA 2nd Fir., Bonif ACCREDITATIO applicable items. Surname Learner Referer Home Address	Republic o Departme U OF EDUI acio Bidg., IN AND Regis	t the Philippint of Education At Meralco At Meralco At tration Form Regis	Proof of Birth (NSO, Papines atton SSESSMENT re., Pasig City 1600 LENCY (A&E) TES stration Date Given Nam Civil Status Single Married A&E Test Applying for	Applicant's T Separated Elemen	M.I. Gender Maie Female
1x1 iO Photo with Name Tag Trite Legibly. Put X on the Birthdate conth Day Year Division LS Program Complete	BUREA 2nd Fir., Bonif ACCREDITATIO applicable items. Surname Learner Referer Home Address	Republic o Departme U OF EDUI acio Bidg., IN AND Regis	f the Philippint of Education A: Meralco A: Meralco A: FQUIVA tration Form Regis	Proof of Birth (NSO, Papines atton SSESSMENT re., Pasig City 1600 LENCY (A&E) TES stration Date Given Nan Civil Status Single Married	Applicant's T Separated Elemen	M.i. Gender Maie Fernale
1x1 iO Photo with Name Tag Frite Legibly. Put X on the Birthdate Sonth Day Year Division LS Program Complete	BUREA 2nd Fir., Bonif ACCREDITATIO applicable items. Surname Learner Referer Home Address	Republic o Departme U OF EDUI acio Bidg., Pagis To be acco Name and	tithe Philippint of Education Association Association Associated Association Form Registration Form Registration Form Address of Address of	Proof of Birth (NSO, Papines atton SSESSMENT re., Pasig City 1600 LENCY (A&E) TES stration Date Given Nam Civil Status Single Married A&E Test Applying for	Applicant's T Separated Elemen	M.i. Gender Maie Fernale
1x1 iO Photo with Name Tag Frite Legibly. Put X on the Birthdate Sonth Day Year Division LS Program Complete	BUREA 2nd Fir., Bonif ACCREDITATIO applicable items. Surname Learner Referer Home Address	Republic o Departme U OF EDUI acio Bidg., IN AND Regis	tithe Philippint of Education Association Association Associated Association Form Registration Form Registration Form Address of Address of	Proof of Birth (NSO, Papines atton SSESSMENT re., Pasig City 1600 LENCY (A&E) TES stration Date Given Nam Civil Status Single Married A&E Test Applying for	Applicant's T Separated Elemen	M.I. Gender Maie Fernale
1x1 iO Photo with Name Tag Vrite Legibly. Put X on the Birthdate Region Division ALS Program Complete	BUREA 2nd Fir., Bonif ACCREDITATIO applicable items. Surname Learner Referer Home Address	Republic o Departme U OF EDUI acio Bidg., Pagis To be acco Name and	tithe Philippint of Education Association Association Associated Association Form Registration Form Registration Form Address of Address of	Proof of Birth (NSO, Papines atton SSESSMENT re., Pasig City 1600 LENCY (A&E) TES stration Date Given Nam Civil Status Single Married A&E Test Applying for	Applicant's T Separated Elemen	M.i. Gender Maie Fernale
1x1 iO Photo with Name Tag //rite Legibly. Put X on the Birthdate honth Day Year Division LS Program Complete Contact Number	BUREA 2nd Fir., Bonif ACCREDITATIO applicable items. Surname Learner Referent Home Address d (Pis. Specify)	Republic o Departme U OF EDUI acio Bidg., Pagis To be acco Name and Testing Ca	the Philippint of Education Aireston Form Regis If Learning Center Indicate the Philippin Aireston Form Regis Address of Inter	Proof of Birth (NSO, Pasition SSESSMENT IVE., Pasig City 1600 LENCY (A&E) TES Stration Date Given Nan Civi: Status Single Married A&E Test Applying for the Registration Officer	Applicant's The Separated Separated Junior to the Separated Separ	M.I. Gender Maie Fernale tary Level
1x1 iD Photo with Name Tag //rite Legibly. Put X on the Birthdate North Day Year Division Division LS Program Complete Contact Number	BUREA 2nd Fir., Bonif ACCREDITATIO applicable items. Surname Learner Referer Home Address	Republic o Departme U OF EDU acio Bidg., Regis To be acco Name and Testing Ce	the Philippint of Education Aireston Form Regis If Learning Center Indicate the Philippin Aireston Form Regis Address of Inter	Proof of Birth (NSO, Papines atton SSESSMENT re., Pasig City 1600 LENCY (A&E) TES stration Date Given Nam Civil Status Single Married A&E Test Applying for	Applicant's The Separated Separated Junior to the Separated Separ	M.I. Gender Maie Fernale
1x1 iO Photo with Name Tag //rite Legibly. Put X on the Birthdate Honth Day Year Division Division Complete Contact Number	BUREA 2nd Fir., Bonif ACCREDITATIO applicable items. Surname Learner Referer Home Address d (Pis. Specify)	Republic o Departme U OF EDU acio Bidg., Regis To be acco Name and Testing Ce	the Philippint of Education Aireston Form Regis If Learning Center Indicate the Philippin Aireston Form Regis Address of Inter	Proof of Birth (NSO, Pasition SSESSMENT IVE., Pasig City 1600 LENCY (A&E) TES Stration Date Given Nan Civi: Status Single Married A&E Test Applying for the Registration Officer	Applicant's The Separated Separated Junior to the Separated Separ	M.i. Gender Maie Fernale
1x1 iO Photo with Name Tag //rite Legibly. Put X on the Birthdate Honto Day Year Division LS Program Complete Contact Number I Certify that I validated applicant in this form be	BUREA 2nd Fir., Bonif ACCREDITATIO applicable items. Surname Learner Referent Home Address d (Pts. Specify)	Republic o Departme U OF EDUI acio Bidg., N AND Regis To be acco Name and Testing Ce	the Philippint of Education Aireston Form Regis If Learning Center Indicate the Philippin Aireston Form Regis Address of Inter	Proof of Birth (NSO, Pasition SSESSMENT Ve., Pasig City 1600 LENCY (A&E) TES stration Date Given Nan Civi: Status Single Married A&E Test Applying for the Registration Officer	Applicant's Separated Separated Junior H	M.i. Gender Maie Fernale
1x1 iO Photo with Name Tag //rite Lagibly. Put X on the Birthdate Birthdate Bonto Day Year Division LS Program Complete Proof of Identity Contact Number	BUREA 2nd Fir., Bonif ACCREDITATIO applicable items. Surname Learner Referer Home Address d (Pis. Specify)	Republic o Departme U OF EDUI acio Bidg., N AND Regis To be acco Name and Testing Ce	the Philippint of Education Aireston Form Regis If Learning Center Indicate the Philippin Aireston Form Regis Address of Inter	Proof of Birth (NSO, Pasition SSESSMENT IVE., Pasig City 1600 LENCY (A&E) TES Stration Date Given Nan Civi: Status Single Married A&E Test Applying for the Registration Officer	Applicant's Separated Separated Junior H	M.i. Gender Maie Fernale
1x1 iO Photo with Name Tag Frite Legibly. Put X on the Birthdate North Day Year Proof of Identity Contact Number I Certify that I validated applicant in this form be	BUREA 2nd Fir., Bonif ACCREDITATIO applicable items. Surname Learner Referent Home Address d (Pts. Specify)	Republic o Departme U OF EDUI acio Bidg., N AND Regis To be acco Name and Testing Ce	the Philippint of Education Aireston Form Regis If Learning Center Indicate the Philippin Aireston Form Regis Address of Inter	Proof of Birth (NSO, Pasition SSESSMENT ve., Pasig City 1600 LENCY (A&E) TES stration Date Given Nam Civi: Status Single Married A&E Test Applying for the Registration Officer	Applicant's The Separated Separated Junior House Thus and Control of the Printed Name	M.I. Gender Maie Fernale tary Level
1x1 iO Photo with Name Tag //rite Lagibly. Put X on the Birthdate Birthdate Bonto Day Year Division LS Program Complete Proof of Identity Contact Number	BUREA 2nd Fir., Bonif ACCREDITATIO applicable items. Surname Learner Referent Home Address d (Pts. Specify)	Republic o Departme U OF EDUI acio Bidg., N AND Regis To be acco Name and Testing Ce	the Philippint of Education Aireston Form Regis If Learning Center Indicate the Philippin Aireston Form Regis Address of Inter	Proof of Birth (NSO, Pasition SSESSMENT ve., Pasig City 1600 LENCY (A&E) TES stration Date Given Nam Civi: Status Single Married A&E Test Applying for the Registration Officer at all information in this form Applicant's Signature Over	Applicant's The Separated Separated Junior House Printed Name	Gender Maie Fernale
with Name Tag Write Legibly. Put X on the Birthdate Month Day Year Region Division ALS Program Complete Proof of Identity Contact Number	BUREA 2nd Fir., Bonif ACCREDITATIO applicable items. Surname Learner Referent Home Address d (Pts. Specify)	Republic o Departme U OF EDUI acio Bidg., N AND Regis To be acco Name and Testing Ce	the Philippint of Education Aireston Form Regis If Learning Center Indicate the Philippin Aireston Form Regis Address of Inter	Proof of Birth (NSO, Pasition SSESSMENT Ve., Pasig City 1600 LENCY (A&E) TES stration Date Given Nan Civi: Status Single Married A&E Test Applying for the Registration Officer	Applicant's Separated Separated Junior H	Gende Maie Ferna
1x1 iD Photo with Name Tag Frite Legibly. Put X on the Birthdate South Day Year Proof of Identity Contact Number I Certify that I validated applicant in this form be Registration Officers	BUREA: 2nd Fir., Bonif ACCREDITATIO applicable items. Surname Learner Referer Home Address d (Pls. Specify) the information supplied by the sed on the required attachments Signature Over Printed Name	Republic o Departme U OF EDU acio Bidg., Regis To be acco Name and Testing Ce	the Philippint of Education Aireston Aireston Form Regis Learning Center I certify the	Proof of Birth (NSO, Pasition SSESSMENT ve., Pasig City 1600 LENCY (A&E) TES stration Date Given Nam Civi: Status Single Married A&E Test Applying for the Registration Officer	Applicant's The Separated Separated Junior House Printed Name	M. Gender Maie Fernald

, r



Republic of the Philippines Department of Education

Region _____



tion and Equivalency (A&E) Test
List of Registrants



	e:		-		Level: <u>ELEM</u> E			
NEBON & DIVISION COOL	Summary of Registrants	M F	Ara (alamania)		LEVEL ELLIVIE			_
		,			(Check the	ments Subr		Program
No.	Name	Age	Birthdate	Gender	ALS Course Certificate			ALS/ Non-ALS
1								
2							<u> </u>	
3							<u> </u>	
4						<u> </u>		<u> </u>
5			1					
6						<u> </u>		
7						<u> </u>		
8						<u> </u>		
9.								
10								
11			T					
12					<u> </u>		<u> </u>	
13								
14			<u> </u>					
15				<u> </u>	<u> </u>	<u></u>		
Prepared by:			Evaluated	by:				
Registration Officer (Sig	gnature Over Printed Name)		Division T	esting Cod	ordinator (Sig	nature ove	r Printed Na	.me)
	Cartified True and Corrects							

Schools Division Superintendent (Signature Over Printed Name)



Republic of the Philippines Department of Education

Region _____ Division of _____



Accreditation and Equivalency (A&E) Test

List of Registrants

Testing Center:				Address:				
Region & Division C	ode:			A&E Test				
	Summary of Registrants			Total:		<u></u>		
		F	1	<u> </u>	IChack the	nents Subn		Program
No.	Name	Age	Birthdate	Gender	ALS Course Certificate	Proof of Identity		ALS/ Non-ALS
2							Ī	
3								
5							<u> </u>	
6						<u> </u>		
8								
9								
10								
12							-	
13				-	<u></u>			<u> </u>
15								
repared by:			Evaluated	by:				
	(Signature Over Printed Name)		Division To	esting Coo	rdinator (Sign	nature over	Printed Na	ne)
	Certified True and Correct:							

Schools Division Superintendent (Signature Over Printed Name)