

Republic of the Philippine Department of Education Region V (Bicol)



DELEASED

Deplid-Division of Catandanaes RECORDS SECTION

OCT 1 4 2015

Memorandum

To

: Chief-CID

Education Program Supervisors Public School District Supervisors Secondary School Heads

From

NYMPHA D. GUEMO

Asst. Schools Division Superintendent

Officer In-Charge

Subject

: Senior High School Early Registration

Date

: October 14, 2015

- Pursuant to DepEd Order No. 41 s. 2015 and with the full implementation of the 1. Senior School in SY 2016-2017, all schools shall ensure that all Grade 10 completers, including those who are outside the formal education system are enrolled in the Senior High School.
- SHS Early Registration shall be conducted from October 19-23, 2015. All Grade 10 2. students in SY 2015-2016 shall submit to their class adviser a duly accomplished SHS Preference Slip (Annex 2) containing their choice of school and programs. High school graduates prior to the implementation of K to 12 Program., PEFT and A & E Test passers and other learners outside the formal system who opt to enter SHS, may register in any of the schools offering SHS using SHS Registration Form (Annex 3).
- Public Schools District Supervisors and Education Program Supervisors shall 3. monitor the activities in schools during the scheduled SHS Early Registration.
- The school head shall ensure the accurate and timely submission of the required 4. information in the LIS. He/she shall also coordinate and submit to the Division SHS Coordinator the registration forms of all SHS registrants who are not covered by the LIS, including summary of their choice of school and tracks. He/She shall ensure that submission are made not later than November 6, 2015.
- 5. Attached herewith is the SHS Preference Slip and SHS Registration Form.
- 6. For information and compliance.

Senior High School Registration Form TO THE STUDENT AND PARENT/GUARDIAN: "Print legibly all information required. Place X marks in appropriate boxes NAME OF STUDENT: Print or type your full name in the following sequence: LAST, FIRST, MIDDLE Place one letter in each box. Leave one box blank between names. 1. DATE OF BIRTH (Month, Day, Year) LAST MIDDLE 5. NATIONALITY 4. PLACE OF BIRTH: (City/Town of Province 8. ELEMENTARY SCHOOL: (where you completed Elementar, 1 avel advection? Grade Monthly Lat. of Completion Elementary School Name: (Do not abbreviate) Address (City/Town or Province) Month/Year of Completion Are you a passer of Philippine Educational Placement Test (PEPT) for Elementary Level? Month/Year of Completion Are you a passer of Accreditation and Equivalency (A&E) Test for Elementary Level? Address (City/Town or Province) Name of Community Learning Center. (Do not abbreviate) 7. JUNIOR HIGH SCHOOL (JHS) (where you completed/are completely JHS / Grade 11) Month/Year of Completion? JHS Name (Do not abbreviate) Address (City/Town or Province) Month/Year of Completion 100 Are you a passer of Philippine Educational Placement Test (PEPT) for JHS Level? Month/Year of Completion No Are you a passer of Accreditation and Equivalency (A&E) Test for JHS Level? Address (City/Town or Province Name of Community Learning Center (Do not abbreviate) 6. SENIOR HIGH SCHOOL (SHS) APPLIED FOR Choose from the 1st of substitution of the 1st for the choose allowed). Do not indicate it is said twice: Make sure that track (Academics, TVL, Sports, Atla tink Letter, attend at the endices are offered in the SHS indicated. Write the New Architecture. the blank if you do not have other choices of SHS/track/strand/speudication. Name of First Choice SHS (Do not abbreviate) Address (City/Town or Province) First Choice Iraca: Strand Track Specializations:

Name of Second Choice SHS. (Do not abbreviate)			n Bydi	e derena Se	
Address (City/Town or Province	Will State	10 Pro 10		- #E		
First Choice	Strand:	75.00	Second Choice Track:	Strand:	a de ago	
Specializations:		er l	Specializations: 1.		Section 2015	
2		1 (E)				
			Branch and Arthur St. Co.			
		312	30°	i de la companya de l		77.9
g. PERMANENT HOME ADDRESS						
House Number and Street Subdivision/Barangey						
Town/City			Se Print Service			
Province				Postal/Zip	Code	
10. CONTACT INFORMATION		•				
Telephone Number			Celiphone Number			
E-mail Address	The first of the second		The second secon	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
1			Tall Territoria de la companya della companya della companya de la companya della		the Arthur	- <u> </u>
i affirm that: 2 (1), I have read the information	contained in DepEd Order No.	, s. 2015 and unde	erstood ati the instruction	ns in connection with my (e)	jistration; am:	
(2) I have been made aware of (3) The preferences supplied in	this din are a result of a well-In	romed decision inexi	ng as discussed with m	y parant(s)/guardian; and	i de la companya de l	
(4) I will abide by the DepEd ru Furthermore, I understand that all info	ormalion I provide in this form, m.	ay be used by the Der	partment of Education s	and I consent to such with th	e assurance that my (personal
details will be kept confidential.			e de la companya de l			
	150 p. (1)					<u></u>
Signature over	Printed Name of the Student		Signature	over Printed Name of the P	areni//Suardien	a. Sagran
	Dale			Long 	7 (10 h) (10 h)	
REMINDERS:				100.77		
		a a de			17. A. B. B. B.	

Department of Education Senior High School Preference Slip TO THE STUDENT AND PARENT/GUARDIAN: Print legibly all information required. Place X marks in appropriate boxes. 2. LEARNER'S REFERENCE NUMBER (LRN) 1. NAME OF STUDENT: Print your full name in the following sequence: LAST, FIRST, MIDDLE. Place one letter in each box. Leave one box blank between names. LAST FIRST MIDDLE 3. SENIOR HIGH SCHOOL (SHS) APPLIED FOR: Choose from the list of schools offering SHS (up to two choices allowed). Do not indicate the same SHS twice, Make sure that track (Academics, TVL, Sports, Arts and Design), strand, and specialization choices are offered in the SHS indicated. Write NONE on the blank if you do not have other choices of SHS/track/strand/specialization. Name of First Choice SHS (Do not abbreviate) Address (City/Town or Province) Second Choice First Choice Strand: Track: Strand: Track: Specializations: Specializations: Name of Second Choice SHS (Do not abbreviate) Address (City/Town or Province) Second Choice First Choice Track: Track: Strand: Specializations: Specializations:

I affirm that (1) I have read the information contained in DepEd Order No. ___, s. 2015 and understood all the instructions in connection with my registration; (2) I have been made aware of the SHS tracks and the importance of choosing the right career path through the Cereer Guidance Program; (3) The preferences supplied in this slip are a result of a well-informed decision making as discussed with my parent(s)/guardian, and

- (4) I will abide by the DepEd rules and policies in relation to the SHS program

Furthermore, Lundersland that all information I provide in this form may be used by the Department of Education and I consent to such with the assurance that my personal details will be kept confidential.

	177 144 27 - 177 177 177 177 177 177 177 177 177
Signature over Printed Name of the Student	Signature over Printed Name of the Parent/Guardian
Date	