



April 12, 2018

DIVISION MEMORANDUM

No. 260, s. 2018

SELECTION OF POOL OF LEARNING FACILITATORS FOR THE DIFFERENT LEARNING AREAS

**To: Assistant Superintendents
 Chiefs, CID and SGOD
 Division Supervisors/Coordinators
 District Supervisors/OICs
 Elementary and Secondary School Heads**

1. Attached is Regional Memorandum No. 0249, s. 2018, dated April 2, 2018, entitled, **“Selection of Pool of Learning Facilitators for the Different Learning Areas”**.
2. Relative to this, each district is required to endorse/nominate the following:
 - a. Elementary- two (2) trainers regardless of learning area
 - b. Secondary - one (1) trainer for each learning area
3. The Division Screening (Session Guide Writing and Demonstration) shall be conducted at the Division Office Conference Room on April 23-24 for the Applicants from Northern Cebu and April 25-26, 2018 for the Applicants from Southern Cebu, taking into account the following criteria and documents needed:

CRITERIA	DOCUMENTS NEEDED
a. Permanent, preferably Master Teacher, School Head and District/Division Supervisors	Certification
b. Must have been a learning area specialist or has taught the learning area for at least five (5) years	Letter of Intent
c. Physically fit and preferably 55 years old and below	Medical Certificate
d. Possess personal and interpersonal skills	Character Reference/Certification Signed by the School Head and District Supervisor
e. Possess excellent communication and facilitation skills	Nomination Form
f. Must have been a trainer at least at the Division Level	Certificate of Recognition
g. Must have performance ratings of at least VS for the last two (2) years	IPCRF
h. Must be a computer proficient	Nomination Form

4. The needed documents shall be submitted to this Office (Attention: Dr. Mary Ann P. Flores) on or before April 19, 2018.

5. The process flow is as follows:
 - a. Phase 1-Paper Screening (April 20, 2018)
 - b. Phase 2-Session Guide Writing (15%)
 - c. Phase 3-Demonstration (85%)

6. The Assessors' Pool shall be composed of the following:
 - a. Dr. Leah B. Apao - Assistant Superintendent
 - b. Dr. Novie O. Mangubat - SGOD Chief
 - c. Dr. Mary Ann P. Flores - CID Chief
 - d. Dr. Gerardo S. Mantos - SGOD EPS
 - e. Dr. Pamela A. Rodemio - EPS- Math/Division Trained Assessor
 - f. Mrs. Juvimar E. Montolo - EPS- Science
 - g. Mrs. Araceli A. Cabahug - EPS- Filipino
 - h. Mrs. Rosemary N. Oliverio - EPS- AP
 - i. Mrs. Evelyn F. Balang - EPS- English
 - j. Mr. Willie Adonay, Jr. - Division Coordinator- HRD
 - k. Mr. Arnulfo Compuesto - President, PSDS Association

7. For the needed documents and other information, please refer to the enclosed Regional Memorandum.

8. Expenses for meals and other related expenses incurred during the conduct of the Division Screening shall be chargeable against **Division MOOE Funds**, while the traveling and other related expenses incurred by each applicant shall be chargeable against **local school MOOE/SEF**, subject to availability and the usual accounting and auditing rules and regulations.

9. This Memorandum serves as Authority to Travel.

10. Dissemination of and compliance with this Memorandum is directed.

For:

RHEA MAR A. ANGTUD, Ed.D., CESO VI
 Schools Division Superintendent

ESTER A. TUTALAN, Ed.D.
 Assistant Schools Division Superintendent

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Asst. Schools Division Superintendent:	(032) 414-7457
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Dr. R/Bred



REPUBLIKA NG PILIPINAS
 REPUBLIC OF THE PHILIPPINES
KAGAWARAN NG EDUKASYON
 DEPARTMENT OF EDUCATION
REHIYON VII, GITNANG VISAYAS
 REGION VII, CENTRAL VISAYAS
 Sudlon, Lahug, Cebu City



APR 02 2018

REGIONAL MEMORANDUM
 No. 0249, s. 2018

SELECTION OF POOL OF LEARNING FACILITATORS FOR THE DIFFERENT LEARNING AREAS

To: Schools Division Superintendents (SDSs)

1. In the light of DepEd – RO VII’s continuing efforts for learning and development, this Office through the Human Resource Development Division (HRDD) requires the **Selection of Pool of Learning Facilitators for the Different Learning Areas** from the 19 Schools Divisions.
2. The objective of this undertaking is to create a pool of learning facilitators for the different learning areas for future DepEd endeavors in line with professional development.
3. In view of the foregoing, the Schools Division Offices (SDOs) are required to conduct the selection of learning facilitators taking into account the following criteria and documents needed, to wit:

CRITERIA	DOCUMENTS NEEDED
a. Permanent, preferably Master Teacher, School Head, and District/Division Supervisors;	Certification
b. Must have been a learning area specialist or has taught the learning area for at least five (5) years;	Letter of Intent and Certification
c. Physically fit and preferably 55 years old and below;	Medical Certificate
d. Possess personal and interpersonal skills;	Character Reference
e. Possess excellent communication and facilitation skills;	Nomination Form
f. Must have been a trainer at least at the Division Level	Certificate of Recognition
g. Must have a performance rating of at least VS for the last two (2) yrs.; and	IPCRF
h. Must be a computer proficient.	Nomination Form

4. The SDOs shall adhere to the process flow specified below:
 - a. Phase 1 – Paper Screening
 - b. Phase 2 – Session Guide Writing (15%)
 - c. Phase 3 – Demonstration (85%)
5. The Assessors’ Pool will select the top applicants per learning area following the allocation scheme below:

Division	No. of Facilitators Per Learning Area
Bais, Bogo, Toledo, Talisay, Carcar, Guihulngan, City of Naga, Tagbilaran, Danao, Dumaguete, Tanjay, Siquijor	5
Bayawan, Mandaue, Lapu-lapu	7
Cebu Province, Cebu City, Bohol Province, Negros Oriental	10

Office of the Director (ORD), Tel. Nos.: (032) 231-1433; 231-1309; 414-7399; 414-7325; Office of the Assistant Director, Tel. No.: (032) 255-4542
 Field Technical Assistance Division (FTAD), Tel. Nos.: (032) 414-7324; Curriculum Learning Management Division (CLMD), Tel. Nos.: (032) 414-7323
 Quality Assurance Division (QAD), Tel. Nos.: (032) 231-1871; Human Resource Development Division (HRDD), Tel. No.: (032) 255-5239
 Education Support Services Division (ESSD), Tel. No.: (032) 254-7062; Planning, Policy and Research Division (PPRD), Tel. Nos.: (032) 231-8030;
 414-7065; Administrative Division, Tel. Nos.: (032) 414-7326; 414-4367; 414-7356; 414-7322; 414-4367
 Finance Division, Tel. Nos.: (032) 256-2375; 255-8061; 414-7321

“Esa 2013: Karapatan ng Lahat, Pananagutan ng Lahat”

6. The Assessors' Pool shall be composed of the following:
- Assistant Schools Division Superintendent;
 - School Governance and Operations Division (SGOD) Chief;
 - Curriculum Implementation Division (CID) Chief;
 - District/Division Supervisor; and
 - Trained Division Assessor.
7. The submission of the list of learning facilitators by learning area with the attached scorecard using the specified template below will be on or before April 27, 2018.

Division: _____
 Learning Area: _____

APPLICANT	RATING		TOTAL	RANK	
	SESSION GUIDE WRITING (15%)	DEMONSTRATION (85%)			
		Computer Skills (15%)			Facilitation Skills (70%)

8. Participants of the Assessors' Pool Development Program held this month of March 2018 at Fortuna Hotel, Cebu City are enjoined to assist in the selection process.
9. For guidance and reference, enclosed are the following documents:
- Enclosure No. 1 – Letter of Intent
 - Enclosure No. 2 – Nomination Form
 - Enclosure No. 3 – Certification
 - Enclosure No. 4 – Medical Certificate
 - Enclosure No. 5 – Screening Rating Guide
10. All expenses incurred during the conduct of all activities relative to the selection of the learning facilitators are chargeable against the Division HRD Funds.
11. For more information and inquiries, please contact the HRDD Office at telephone number (032) 412-7324 and look for Mr. Misael G. Boragonia, Chief, HRDD.
12. Immediate dissemination of, and compliance with this Memorandum is desired.

Juliet A. Jeruta
JULIET A. JERUTA, Ph.D., CESO IV
 Director III
 Officer – in – Charge

JM/STJ/mc/s/hds
 HRDD 2018

Enclosure No. 1 to Regional Memorandum No. 249, s. 2018

LETTER OF INTENT

Date _____

Schools Division Superintendent

Sir / Madam:

I have the honor to apply as a member of the Learning Facilitators' Pool of the Schools Division of _____.

I likewise, signify my commitment if I qualify to the Pool, to make myself available for the training programs that would require my expertise and services.

Thank you very much.

Very truly yours,

Signature over printed name
Position

NOMINATION FORM

One copy to be filled up by the immediate supervisor and another by a co-worker or peer. Filled out copies should be placed in a sealed envelop and signed before submission to the Division Screening Committee/Assessors' Pool.

Name of Nominee:	Position:
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1. How long have you known the nominee (years/month)?

2. In what connection or under what circumstances have you known him/her?

3. Please rate the nominee in terms of the dimensions which have been identified as critical to program performance. The checklist below is intended to facilitate your assessment. If you wish, you may also write a separate letter as an addition to this form.

DIMENSIONS	No Basis for Judgment	Below Average	Above Average	Excellent/Outstanding
Integrity				
Work Ethics				
Interpersonal Skills				
Time Management				
Stress Management				
Communication Skills				
Computer Proficiency				

4. How will this person be able to contribute in providing better training programs?

Signature Over Printed Name

Enclosure No. 3 to Regional Memorandum No. 249, s. 2018

Date:

CERTIFICATION

Sir/Madam:

This is to certify that Mr./Mrs. _____ has been with the (Office) as a (Position/Designation) for (length of service).

This Office does not pose any objection to any of his/her assignments as a division/regional facilitator if s/he will qualify after the screening process.

Thank you very much.

Very truly yours,

Signature over printed name
Position

MEDICAL CERTIFICATE

I, the undersigned Dr. _____, Doctor of Medicine.

Certify that the examination of Mr/Ms _____

Date of birth: _____ Age: _____

reveals no contraindications for participating in cycling competitions.

Medical certificate issued in (place): _____

Date: _____ Doctors sign: _____

Doctors Stamp:



