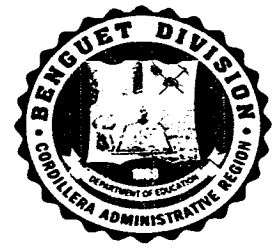




Republic of the Philippines  
DEPARTMENT OF EDUCATION  
**Cordillera Administrative Region**  
**SCHOOL DIVISION OFFICE OF BENGUET**  
Wangal, La Trinidad, Benguet  
Telefax: (074) 422-6570; (074)422-7501



DIVISION MEMORANDUM

December 1, 2017

No. **311 X 2017**

**Registration Period for the 2017 Completers of the Alternative Learning System (ALS) Program**

DEC 01 2017  
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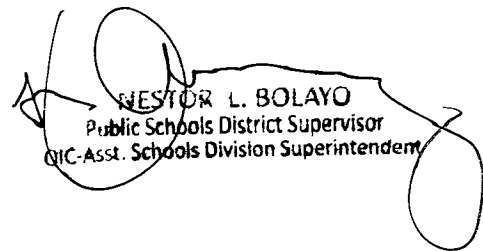
To: Education Program Supervisors  
Public District Supervisors / Coordinating Principals  
Elementary & Secondary School Heads (Private & Public)  
Facilitators/Teachers

1. Pursuant to DM. CI. 2017. 00359, the Department of Education, through the Bureau of Education Assessment (BEA) shall conduct **Accreditation and Equivalence (A&E) Test** for 2017 completers of the Alternative Learning System (ALS) Program on **February 11, 2018**.
2. Starting on **December 1, 2017 to January 12, 2018**, 2017 ALS Program completers may register at the designated centers. ALS completer's without LRN may register as long as they have certificate of ALS program completion issued by their Learning Facilitator and verified by the registration committee.
3. For those who wish to take A&E Test for junior high school level without elementary certificate, they are advised to take certification for elementary level.
4. Registration requirements are as follows:
  - a) Original and Photocopy of Certification of ALS Program Completion issued by the Learning Facilitator (for ALS Learners only);
  - b) Original and photocopy of Birth Certificate (PSA);
  - c) If copy of Birth Certificate from Philippine Statistical Authority (PSA) is not available, any of the following shall be submitted:
    - i. Baptismal Certificate;
    - ii. Voter's ID (with picture and Signature);
    - iii. Valid Passport
    - iv. Valid Driver's License; and
    - v. 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)

- d) Two (2) 1 x 1 identical ID photo (white background with name tag).
5. In compliance with DepEd Memorandum 121, s. 2017, portfolio assessment will not be required for A&E Test on February 2018 and will not be a part of the final rating. The test is multiple choice type only. The passing rate is 75% as per D.O. 55, s. 2016. Relative hereto, all elementary and secondary school heads are requested to orient their teachers in proper conduct of the test.
6. **NO PAYMENT SHALL BE COLLECTED** by anyone involved in the A & E Test registration, Administration and issuance of certificate of rating.
7. The following are the forms to accomplish: (attached forms)
- a) Registration form
  - b) Certification of ALS Program
8. The Regional Testing Coordinator (RTCs) and the DTCs will monitor the registration process in the SDOs and Dos.
9. Immediate dissemination of this memorandum is desired.

**MARIE CAROLYN B. VERANO, CESO VI**  
Schools Division Superintendent

*/wcb/divisionmem2017*

  
NESTOR L. BOLAYO  
Public Schools District Supervisor  
VIC-Asst. Schools Division Superintendent

1x1 ID Photo with Name Tag

Republic of the Philippines  
Department of Education  
**BUREAU OF EDUCATION ASSESSMENT**  
2nd Flr., Bonifacio Bldg., Meralco Ave., Pasig City 1600

**ACCREDITATION AND EQUIVALENCY (A&E) TEST**

Registration Form

Write Legibly. Put X on the applicable items. Registration Date

Surname Given Name M.I.

Birthdate (Month, Day, Year) Learner Reference Number Civil Status (Single, Married, Separated) Gender (Male, Female) Home Address

Region Division Learning Center

ALS Program Completed (Pls. Specify) A&E Test Applying for (Elementary Level, Junior High School)

Proof of Identity Contact Number Name and Address of Testing Center

To be accomplished by the Registration Officer

I certify that I validated the information supplied by the applicant in this form based on the required attachments.  
Registration Officer's Signature Over Printed Name

I certify that all information in this form are TRUE and CORRECT.  
Applicant's Signature Over Printed Name

Required Attachments Proof of Identity Proof of Birth (NSO, Passport, Any legal Documents) ALS Program Certification (if any)

1x1 ID Photo with Name Tag

Republic of the Philippines  
Department of Education  
**BUREAU OF EDUCATION ASSESSMENT**  
2nd Flr., Bonifacio Bldg., Meralco Ave., Pasig City 1600

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Required Attachments Proof of Identity Proof of Birth (NSO, Passport, Any legal Documents) ALS Program Certification (if any)

Enclosure No. 2



Republic of the Philippines  
**Department of Education**  
Division of \_\_\_\_\_  
Region \_\_\_\_\_

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### CERTIFICATE OF ALS PROGRAM COMPLETION

This is to certify that \_\_\_\_\_ of \_\_\_\_\_  
*(Name)* *(Address)*

\_\_\_\_\_ has satisfactorily completed \_\_\_\_\_  
*(Specify ALS Program Level Completed)*

at \_\_\_\_\_ in \_\_\_\_\_  
*(Learning Center)* *(Address of Learning Center)*

This certification is issued as one of the requirements for Accreditation and Equivalency (A&E) Test application.

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Signature over Printed Name  
**ALS Facilitator/Mobile Teacher**

\*Not Valid Without the SDO Dry Seal