



Office of the Schools Division Superintendent

DIVISION MEMORANDUM No. 102 S. 2014

**TO : Public Schools District Supervisors
School Administrators, Principals, Head Teachers,
Teacher-in-Charge, and all Concerned Teachers (Public and
Private)**

**FROM :  ATTY. AUGUSTIN P. LABAN III
OIC – Assistant Schools Division Superintendent**

**SUBJECT : METROBANK-MTAP-DEP-Ed Math Challenge Written Elimination
Round (Division Level)**

DATE : November 28, 2014

1. This is to announce to the field that the Metrobank-MTAP-DepED Math Challenge written elimination round will be on January 15, 2015 for Elementary and January 16, 2015 for High School at 8:00a.m.
2. The venues for the competition will be announced later.
3. A registration fee of P20.00 shall be collected from each pupil/student participant to defray expenses for the test materials and other incidental expenses to be charged against local funds, PTA funds and other sources subject to the usual accounting and auditing rules and regulations. Deadline for the submission of contestants will be on or before December 10, 2014. Late submission shall not be entertained.
4. Attached is a registration form for the coach to fill up.
5. Immediate and wide dissemination of this memorandum is desired.

2015 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/Year Level: _____
 Name of Contestants:

Name of Coach

Grade/Year Level: _____
 Name of Contestants:
 1. _____
 2. _____
 3. _____

Name of Coach
 1. _____

Grade/Year Level: _____
 Name of Contestants:
 1. _____
 2. _____
 3. _____

Name of Coach
 1. _____

Grade/Year Level: _____
 Name of Contestants:

Name of Coach

Grade/Year Level: _____
 Name of Contestants:
 1. _____
 2. _____
 3. _____

Name of Coach
 1. _____

Grade/Year Level: _____
 Name of Contestants:
 1. _____
 2. _____
 3. _____

Name of Coach
 1. _____

IMPORTANT!

Submit a photocopy of this registration form to the DepEd Division Math Supervisor where your school is located on or before **December 15, 2014**. Present the original copy to the registration in-charge during the Elimination Round on January 15, 2015 (Elementary) or January 16, 2015 (High School). **This serves as your permit. No permit, no entry.** 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.

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

 Printed Name and Signature
 of the Principal



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(02) 912.5249
 (02) 709.0447
 (02) 857.0618



Write us:

c/o Metrobank Foundation, Inc., 4F Metrobank Plaza, Sen. Gil J. Puyat Avenue, 1200 Makati City



Email us:

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