
	<b>General Quality Form</b>		Document Code: Revision: 00 Effectivity date: 08-20-2018
	<b>Division Memorandum</b>		Name of Office: <b>SDO –Admin-Personnel Unit</b>

DepED DIVISION OFFICE  
 BAGUIO CITY  
 DEC 10 2019

Office of the Superintendent  
 Division memorandum Number 657, s. 2019

**APPROVED RECLASSIFICATION OF POSITIONS DUE TO  
 EQUIVALENT RECORD FORM (ERF)**


**TO: Public Schools District Supervisors  
 Public Elementary and Secondary School Heads  
 Public Elementary and Secondary Teachers**


1. This is to announce the implementation of the reclassification of Equivalent Record Form (ERF) of the following elementary and secondary school teachers:

NAME OF INCUMBENT		SCHOOL	FROM	TO
ELEMENTARY				
AM-AMLAN	LEONORA	DOÑA AURORA ELEMENTARY SCHOOL	T 1	T 2
ASPRER	GLORIA	SAN LUIS ELEMENTARY SCHOOL	T 1	T 2
CACAP	JESSIE	STO TOMAS ELEMENTARY SCHOOL	T 1	T 2
ESPENILLA	CRYSTALYN	QUIRINO ELEMENTARY SCHOOL	T 1	T 3
MAGAYA	RUBY GRACE	RIZAL ELEMENTARY SCHOOL	T 1	T 3
MELECIO	LUTHER PRIME	ADIWANG ELEMENTARY SCHOOL	T 1	T 3
PABLO	MARIFER	CRYSTAL CAVE ELEMENTARY SCHOOL	T 1	T 3
PASOQUEN	ELEANOR	LUCBAN ELEMENTARY SCHOOL	T 1	T 3
TAMULANG	DONESIA	HAPPY HOLLOW ELEMENTARY	T 1	T 3
WADWADAN	DEZZA JOYCE	BAKAKENG ELEMENTARY SCHOOL	T 1	T 3
WAYAN	AILYN	BAKAKENG ELEMENTARY SCHOOL	T 1	T 3
JUNIOR HIGH SCHOOL				
ABORDO	GEORGE	ROXAS NATIONAL HIGH SCHOOL	T 1	T 2
NARDO	DAVE	GUISAD VALLEY NATIONAL HIGH SCHOOL	T 1	T 3
PARAYAO	RHEA MAY	MIL-AN NATIONAL HIGH SCHOOL	T 1	T 3
PUSOT	PYRON	DOMINICAN-MIRADOR NATIONAL HIGH SCHOOL	T 1	T 3

2. The above-listed teachers are advised to accomplish and submit their documents for the processing of appointments on or before **December 12, 2019** to the HRMO, Ms. Ma. Louella C. Moncada. Please check the list of requirements below;

- a. Personal Data Sheet (CSC Form 212 Revised 2017) (back-to-back) – 3 sets with recent passport size with name tag and signature.
  - b. Colored photocopy of authenticated PRC license (back-to-back) – 2 copies
  - c. Oath of Office – 2 copies
  - d. Position Description Form for T – II and T - III (back-to-back) -2 copies
  - e. Statement of Assets, Liabilities and Network (SALN) (back-to-back) – 2 copies
  - f. Work experience sheet
3. Requirements letter e, d, e and f are already attached for your reference.
  4. For information and guidance.



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

Republic of the Philippines  
**POSITION DESCRIPTION FORM**  
**DBM-CSC Form No. 1**  
 (Revised Version No. 1, s. 2017)

1. POSITION TITLE (as approved by authorized agency) with  
 parenthetical title

**TEACHER III**

2. ITEM NUMBER

3. SALARY GRADE

SG 13-1

4. FOR LOCAL GOVERNMENT POSITION, ENUMERATE GOVERNMENTAL UNIT AND CLASS

- Province  
 City  
 Municipality

- 1st Class  
 2nd Class  
 3rd Class  
 4th Class

- 5th Class  
 6th Class  
 Special

5. DEPARTMENT, CORPORATION OR AGENCY/  
 LOCAL GOVERNMENT

6. BUREAU OR OFFICE

DEPARTMENT OF EDUCATION-DIVISION OF BAGUIO CITY

DEPARTMENT OF EDUCATION-DIVISION OF BAGUIO CITY

7. DEPARTMENT / BRANCH / DIVISION

8. WORKSTATION / PLACE OF WORK

DEPARTMENT OF EDUCATION-DIVISION OF BAGUIO CITY

9. PRESENT APPROP ACT

10. PREVIOUS APPROP ACT

11. SALARY AUTHORIZED

12. OTHER COMPENSATION

N/A

Php25,232.00

13. POSITION TITLE OF IMMEDIATE SUPERVISOR

14. POSITION TITLE OF NEXT HIGHER SUPERVISOR

PRINCIPAL

PSDS

15. POSITION TITLE, AND ITEM OF THOSE DIRECTLY SUPERVISED

*(if more than seven (7) list only by their item numbers and titles)*

POSITION TITLE

ITEM NUMBER

N/A

N/A

16. MACHINE, EQUIPMENT, TOOLS, ETC., USED REGULARLY IN PERFORMANCE OF WORK

Audio-visual materials, Manual, Books, Charts, Daily Lesson Log, Calculator, Computer unit

17. CONTACTS / CLIENTS / STAKEHOLDERS

17a. Internal

Occasional

Frequent

17b. External

Occasional

Frequent

Executive / Managerial

General Public

Supervisors

Other Agencies

Non-Supervisors

Others (Please Specify):

Staff

18. WORKING CONDITION

Office Work

Other/s (Please Specify)

Field Work

19. BRIEF DESCRIPTION OF THE GENERAL FUNCTION OF THE UNIT OR SECTION

To teach the minimum essentials of the grade/ year level assigned

**20. BRIEF DESCRIPTION OF THE GENERAL FUNCTION OF THE POSITION (Job Summary)**

- 80% Teach competently the minimum essentials of the grade assigned
- 5% Prepare pupil's/student's records and other required reports
- 5% Participate in co-curricular and extra-curricular activities
- 5% Integrate DepEd thrust and programs
- 5% Maintain proper classroom management for effective classroom situation

**21. QUALIFICATION STANDARDS**

21a. Education	21b. Experience	21c. Training	21d. Eligibility
Bachelor of Elementary/Secondary Education or Bachelor's Degree plus 18 professional education units	2 years relevant experience	None required	LET/PBET/RA 1080

21e. Core Competencies	Competency Level
N/A	N/A

21f. Leadership Competencies	Competency Level
N/A	N/A

22. STATEMENT OF DUTIES AND RESPONSIBILITIES (Technical Competencies)		Competency Level
Percentage of Working Time	(State the duties and responsibilities here:)	
same as no. 20	same as no. 20	N/A

**23. ACKNOWLEDGMENT AND ACCEPTANCE:**

I have received a copy of this position description. It has been discussed with me and I have freely chosen to comply with the performance and behavior/conduct expectations contained herein.

\_\_\_\_\_  
Employee's Name, Date and Signature

\_\_\_\_\_  
Supervisor's Name, Date and Signature

Republic of the Philippines  
**POSITION DESCRIPTION FORM**  
**DBM-CSC Form No. 1**  
 (Revised Version No. 1, s. 2017)

1. POSITION TITLE (as approved by authorized agency) with  
 parenthetical title

**TEACHER II**

2. ITEM NUMBER

3. SALARY GRADE

SG 12-1

4. FOR LOCAL GOVERNMENT POSITION, ENUMERATE GOVERNMENTAL UNIT AND CLASS

- Province  
 City  
 Municipality

- 1st Class  
 2nd Class  
 3rd Class  
 4th Class

- 5th Class  
 6th Class  
 Special

5. DEPARTMENT, CORPORATION OR AGENCY/  
 LOCAL GOVERNMENT

6. BUREAU OR OFFICE

DEPARTMENT OF EDUCATION-DIVISION OF BAGUIO CITY

DEPARTMENT OF EDUCATION-DIVISION OF BAGUIO CITY

7. DEPARTMENT / BRANCH / DIVISION

8. WORKSTATION / PLACE OF WORK

DEPARTMENT OF EDUCATION-DIVISION OF BAGUIO CITY

9. PRESENT APPROP ACT

10. PREVIOUS APPROP ACT

11. SALARY AUTHORIZED

12. OTHER COMPENSATION

N/A

Php22,938.00

13. POSITION TITLE OF IMMEDIATE SUPERVISOR

14. POSITION TITLE OF NEXT HIGHER SUPERVISOR

PRINCIPAL

PSDS

15. POSITION TITLE, AND ITEM OF THOSE DIRECTLY SUPERVISED

*(if more than seven (7) list only by their item numbers and titles)*

POSITION TITLE

ITEM NUMBER

N/A

N/A

16. MACHINE, EQUIPMENT, TOOLS, ETC., USED REGULARLY IN PERFORMANCE OF WORK

Audio-visual materials, Manual, Books, Charts, Daily Lesson Log, Calculator, Computer unit

17. CONTACTS / CLIENTS / STAKEHOLDERS

17a. Internal	Occasional	Frequent	17b. External	Occasional	Frequent
Executive / Managerial Supervisors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	General Public	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Non-Supervisors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Other Agencies	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Staff	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Others (Please Specify):		

18. WORKING CONDITION

- Office Work  Field Work  Other/s (Please Specify)

19. BRIEF DESCRIPTION OF THE GENERAL FUNCTION OF THE UNIT OR SECTION

To teach the minimum essentials of the grade/ year level assigned

**20. BRIEF DESCRIPTION OF THE GENERAL FUNCTION OF THE POSITION (Job Summary)**

- 80% Teach competently the minimum essentials of the grade assigned
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**21. QUALIFICATION STANDARDS**

21a. Education	21b. Experience	21c. Training	21d. Eligibility
Bachelor of Elementary/Secondary Education or Bachelor's Degree plus 18 professional education units	1 year relevant experience	None required	LET/PBET/RA 1080

21e. Core Competencies	Competency Level
N/A	N/A

21f. Leadership Competencies	Competency Level
N/A	N/A

22. STATEMENT OF DUTIES AND RESPONSIBILITIES (Technical Competencies)		Competency Level
Percentage of Working Time	(State the duties and responsibilities here:)	
same as no. 20	same as no. 20	N/A

**23. ACKNOWLEDGMENT AND ACCEPTANCE:**

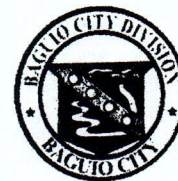
I have received a copy of this position description. It has been discussed with me and I have freely chosen to comply with the performance and behavior/conduct expectations contained herein.

Employee's Name, Date and Signature

Supervisor's Name, Date and Signature



Republic of the Philippines  
Department of Education  
Cordillera Administrative Region  
**DIVISION OF BAGUIO CITY**  
# 82 Military Cut-Off, Baguio City  
Tel. No.: (074) 442-7819



## OATH OF OFFICE

I, \_\_\_\_\_ of  
\_\_\_\_\_ having been appointed to the  
position of \_\_\_\_\_ hereby solemnly swear,  
that I will faithfully discharge to the best of my ability, the duties of my present  
position and of all others that I may hereafter hold under the Republic of the  
Philippines; that I will bear true faith and allegiance to the same; that I will obey the  
laws, legal orders, and decrees promulgated by the duly constituted authorities of the  
Republic of the Philippines; and that I impose this obligation upon myself voluntarily,  
without mental reservation or purpose of evasion.

SO HELP ME GOD.

\_\_\_\_\_  
(Signature over Printed Name  
of the Appointee)

Government ID: \_\_\_\_\_  
ID Number: \_\_\_\_\_  
Date Issued: \_\_\_\_\_

\_\_\_\_\_  
Subscribed and sworn to before me this \_\_\_\_\_ day of  
\_\_\_\_\_, 20\_\_ in Baguio City, Philippines.

**NIEVES D. EBANIO**  
Administrative Officer V  
\_\_\_\_\_  
(Signature over Printed Name of Person  
Administering the Oath)

# SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of \_\_\_\_\_

(Required by R.A. 6713)

*Note: Husband and wife who are both public officials and employees may file the required statements jointly or separately.*

*Joint Filing*                     
  *Separate Filing*                     
  *Not Applicable*

DECLARANT: _____ (Family Name)      (First Name)      (M.I.)	POSITION: _____ AGENCY / OFFICE: _____ OFFICE ADDRESS: _____ _____ POSITION: _____ AGENCY / OFFICE: _____ OFFICE ADDRESS: _____ _____
ADDRESS: _____ _____	
SPOUSE _____ (Family Name)      (First Name)      (M.I.)	POSITION: _____ AGENCY / OFFICE: _____ OFFICE ADDRESS: _____ _____

## UNMARRIED CHILDREN BELOW EIGHTEEN (18) YEARS OF AGE LIVING IN DECLARANT'S HOUSEHOLD

NAME	DATE OF BIRTH	AGE

## ASSETS, LIABILITIES AND NET WORTH

*(Including those of the spouse and unmarried children below (18) years of age living in declarant's household)*

### 1. ASSETS

#### a. Real Properties\*

DESCRIPTION <small>(e.g. lot, house and lot, condominium and improvements)</small>	KIND <small>(e.g. residential, commercial, industrial, agricultural and mixed use)</small>	LOCATION	ASSESED VALUE	CURRENT FAIR MARKET VALUE	ACQUISITION		ACQUISITION COST
			<small>(As found in the Tax Declaration of Real Property)</small>		YEAR	MODE	

**Subtotal:** \_\_\_\_\_

#### b. Personal Properties\*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/ AMOUNT

**Subtotal:** \_\_\_\_\_

**TOTAL ASSETS (a+b):** \_\_\_\_\_

### 2. LIABILITIES\*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE

**TOTAL LIABILITIES:** \_\_\_\_\_

**NET WORTH: Total Assets less Total Liabilities:** \_\_\_\_\_

*\*Additional sheet/s may be used, if necessary.*



**BUSINESS INTERESTS AND FINANCIAL CONNECTIONS**

*(of Declarant / Declarant's spouse/ Unmarried Children Below Eighteen (18) years of Age Living in Declarant's Household)*

*I/ We do not have any business interest or financial connection*

NAME OF ENTITY / BUSINESS ENTERPRISE	BUSINESS ADDRESS	NATURE OF BUSINESS INTEREST &/ OR FINANCIAL CONNECTION	DATE OF ACQUISITION OF INTEREST OR CONNECTION

**RELATIVES IN THE GOVERNMENT SERVICES**

*(Within the Fourth Degree of Consanguinity of Affinity. Include also Bilas, Balae, and Inso)*

*I/ We do not know of any relative/s in the government service*

NAME OF RELATIVE	RELATIONSHIP	POSITION	NAME OF AGENCY/ OFFICE AND ADDRESS

I hereby certify that these are true and correct statements of my assets, liabilities and net worth, business interests and financial connection, including those of my spouse and unmarried children below eighteen (18) years of age living in my household, and that to the best of my knowledge, the above - enumerated are names of my relatives in the government within the fourth civil degree of consanguinity or affinity.

I hereby authorize the Ombudsman or his/her duly authorized representative to obtain and secure from all appropriate government agencies, including the bureau of internal Revenues such documents that may show my assets, liabilities, net worth, business interests and financial connections, to include those of my spouse and unmarried children below eighteen (18) years of age living with me in my household covering previous years to include the year i first assumed office in government.

Date: \_\_\_\_\_

\_\_\_\_\_  
*(Signature of Declarant)*

\_\_\_\_\_  
*(Signature of Co-Declarant/ Spouse)*

Government Issued ID: \_\_\_\_\_

ID no.: \_\_\_\_\_

Date Issued: \_\_\_\_\_

Government Issued ID: \_\_\_\_\_

ID no.: \_\_\_\_\_

Date Issued: \_\_\_\_\_

**SUBSCRIBED AND SWORN** to before me this \_\_\_\_\_ day of \_\_\_\_\_, affiant exhibiting to me the above-stated government issued identification card.

\_\_\_\_\_  
*(Person Administering Oath)*

## WORK EXPERIENCE SHEET

**Instructions:** 1. Include only the work experiences relevant to the position being applied for.

2. The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word Present, e.g., 1998-Present. Work experience should be listed starting with the most recent/present employment

- Duration:
- Position:
- Duration:
- Position:
- Name of Office/Unit:
- Immediate Supervisor:
- Name of Agency/Organization and Location: Department of Education, Division of Baguio City
  - List of Accomplishments and Contributions (if any)
  
- Summary of Actual Duties

\_\_\_\_\_  
Signature over Printed Name

Date: December 16, 2019