



Republic of the Philippines
Department of Education
Cordillera Administrative Region
SCHOOLS DIVISION OF BAGUIO CITY



September 18, 2026

DIVISION MEMORANDUM
No. 620, s. 2026

**ADDENDUM & CORRIGENDUM TO DIVISION MEMORANDUM NO. 610 S, 2026 RE:
“DIVISION FEDERATION SUPREME SECONDARY LEARNER GOVERNMENT
(DFSSLG) LEADERSHIP AND CHARACTER DEVELOPMENT JOURNEY IN
LEADERSHIP, INTEGRITY, FAITH AND EXCELLENCE”**

To : Office of the Assistant Schools Division Superintendent
Chief Education Supervisors
Public Schools District Supervisors
Public School Heads
Division Learner Government SSLG Teacher-Advisers & Officers
All Others Concerned

1. Relative to Division Memorandum No. 610, s. 2026, titled “*Division Federation Supreme Secondary Learner Government (DFSSLG) Leadership and Character Development Journey in Leadership, Integrity, Faith and Excellence*,” for student leaders of the Schools Division Office of Baguio City and to be held at the SDO Baguio City 3rd Floor Training Hall, this Office announces the change in the date of the last day of the training, with the following details:

FROM	TO
September 19 & 26, 2026 October 3, 10, 17, 28 , 2026	September 19 & 26, 2026 October 3, 10, 17, 24 , 2026

2. In addition, the following personnel and learner participants are identified in relation to the conduct of the training:

a. Members of the Technical Working Group

NAME	POSITION
Arlani B. Buccat	Education Program Specialist - SGOD
Wennie Joy D. Sapdoy	Administrative Aide VI - SGOD
Jeahlyn B. Dumag	Administrative Assistant II
Vincent Jay Luis	Administrative Assistant II - ICT
1 Support Staff	Utility

b. Learner Participants

NAME	BAGUIO CITY SCHOOL FOR THE ARTS
1. JHAICEE LOUISE J. DIVINO	President
2. RHAINE MAICA A. SOO	Vice-President
3. YAMATO M. KIACO JR.	Secretary



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4. The following documents are enclosed for reference:
 - a. Enclosure No. 1: Parental Consent Form
 - b. Enclosure No. 2: Learner Consent, Waiver, Indemnity and Release
5. Teaching and non-teaching participants are entitled to corresponding service credits, subject to the usual accounting and auditing rules and regulations in accordance with DepEd Order No. 53, s. 2003, and other related issuances governing the grant of service credits.
6. For queries and concerns, kindly contact Julie-Abegail Loy C. Martillana or Ron Bixby A. Pedronio, Division Youth Formation Coordinators thru (074) 665-1231 youthformationbaguio@gmail.com.
7. Immediate dissemination of this memorandum is desired.


Digitally signed by Soraya T. Faculo
Date: 2026.09.18 17:56:59 +08'00'
SORAYA T. FACULO PhD, CESO V
Schools Division Superintendent

SGOD/NMT/jalcm



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PARENTAL CONSENT

I, _____, as the parent or legal guardian of _____, hereby acknowledge that I have been informed of the details of the conduct of the **“Division Federation Supreme Secondary Learner Government (DFSSLG) Leadership and Character Development Journey in Leadership, Integrity, Faith and Excellence”**) that will be held on **September 19 and 26, 2026, October 3, 10, 17, and 24, 2026**, 8:00am to 4:00pm at the SDO Baguio City 3rd Floor Training Hall SDO Baguio City.

I understand that my child’s in-person attendance at the event will include associating with teachers, fellow learners and school personnel, and other persons inside and outside of the school that may put my child at risk of transmission of any communicable disease, notwithstanding the precautions undertaken by the implementing team.

Voluntary Participation

I acknowledge that my child’s participation in this activity is completely voluntary. My child may decline to participate or withdraw from participation at any time for any reason. Declining or withdrawing participation will not result in any penalty or loss of benefits or reduction of any basic right to which my child is entitled. While there remains the risk of possible transmission of any communicable disease to my child/ren, and to the members of my household, I freely assume the said risk and I permit my child/ren to attend this activity.

Exclusion (Limitations/Ineligibility)

I am aware that symptoms of any communicable disease include, but are not limited to, fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, the new loss of taste or smell, sore throat, congestion or runny nose, nausea, vomiting, and diarrhea.

I confirm that my child currently has none of those symptoms and is in good health. I will not allow my child to physically go to the event if my child or any member of my household develops any of the said symptoms or any other symptoms of illness that may or may not be related to any communicable disease. I will also inform the school/division and not allow my child to attend the event if my child or any of my household members test positive for any communicable disease. My child/ren and I, with my household members, will follow the required health and safety protocols and procedures adopted by the school and community.

Documentation

I confirm that I give full permission to any recording or picture taken of my child during the conduct of this event and to use some or all my child’s images/ contribution/ performance in any publication (including electronic publications



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such as film or website) created by or for the Department of Education (DepEd) - Schools Division of Baguio City official platforms.

Confidentiality

I am aware that any information that will be given during the activity will be kept strictly confidential, and personal information will be treated in accordance with the Republic Act 10173, Data Privacy Act of 2012. I am assured that the information about my child will not be shared outside of the implementation team. My child's name will not be used when data from this activity is analyzed.

I hereby confirm that I agree and understand the commitment of my child as a participant. I also understand and will support my child's endeavor to meet the expectations, guidelines, and responsibilities to his/her fellow participants and to DepEd.

To the extent allowed by law and rules, I hereby agree to waive, release, and discharge all claims, causes of action, damages, and rights against the school/division and its personnel as well as officials and personnel of the Department of Education SDO Baguio City relative to the conduct of the activity.

With full understanding, I – on behalf of myself, my household members, and my child/ren – hereby freely and voluntarily give my consent to my child's participation in the activity. I also attest that I had sought the views of my child, and he/she has expressed a willingness to participate in the activity.

CONTACT DETAILS FOR QUESTIONS OR PROBLEMS

For any concerns or clarification, you may contact the SDO Baguio City, SGOD-YF through the email address youthformationbaguiocity@gmail.com / julieabegail.martillana@deped.gov.ph or through telephone number +639301857190.

_____ Signature of Parent/Guardian over Printed Name	_____ Contact Details (Mobile Number)
_____ Name of Child/ren	_____ Date



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LEARNER CONSENT, WAIVER, INDEMNITY and RELEASE
(To be completed by the Learner)

I, _____, agreed to participate with the consent of my parents and/or legal guardian in the **“Division Federation Supreme Secondary Learner Government (DFSSLG) Leadership and Character Development Journey in Leadership, Integrity, Faith and Excellence”** that will be held on **September 19 and 26, 2026, October 3, 10, 17, and 24, 2026**, 8:00am to 4:00pm at the SDO Baguio City 3rd Floor Training Hall SDO Baguio City.

I agree to give permission to the **Department of Education (DepEd) – Schools Division of Baguio City – Youth Formation** and its representatives to make recordings of my voice and to take photographs and/or videos in which I appear in at the event and location stated above, to be used for the communications and various public campaigns of the Department be it in print, broadcast and/or electronic media.

I have read and understood the accompanying letter and information leaflet. For things I do not understand, I will ask my Parent/Guardian to clarify the objective of the activity for me.

I know the purpose of the project/activity and the part I will be involved in. I know that DepEd and its representative are not allowed to use the information about me in any form that might harm my rights and well-being.

_____ Name of Learner	_____ Name of School
_____ Age	_____ Date