

Republika ng Pilipinas

Department of Education

OFFICE OF THE UNDERSECRETARY HUMAN RESOURCE AND ORGANIZATIONAL DEVELOPMENT

[Enclosure 1]

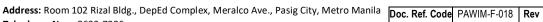
GENERAL ELIGIBILITY REQUIREMENTS/CHECKLIST

Name:	
Scholarship Program:	
Sponsoring Agency/Organization:	
Region/SDO:	
Work Station:	

Remar ks	Eligibility	Documentary Requirements
(√ , X , others)		
	a. Must be a Filipino citizen.	Updated Personal Data Sheet
	b. Must have obtained a very satisfactory (VS) performance rating for two (2) consecutive years.	<u> </u>
	c. Must present his/her Individual Development Plan (IDP) that is validated by the head of the office.	
	d. Must be holding a permanent item.	Updated Service Record
	e. Must be physically, mentally, and psychologically fit.	Medical certificate from any government physician as to health status.
	f. Must have no master's degree (for those who will apply for a master's degree) and shall have no doctoral degree (for those who will apply for a doctoral degree).	Updated Personal Data Sheet



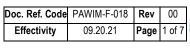




Telephone Nos.: 8633-7206

Email Address: usec.hrod@deped.gov.ph

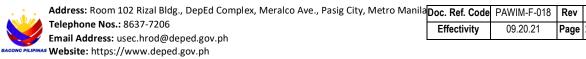
***Swebsite: https://www.deped.gov.ph





g. Must have no current or pending enrollment in other institutions for graduate or postgraduate degree programs (for degree programs).	
h. Must be willing to sign a Scholarship Contract and commit to its provisions.	(shall be complied after being officially nominated)
i. Must be willing to prepare, share, and implement a Scholarship Report and Work Application Plan (WAP).	
j. Must have no pending administrative, civil, or criminal case, and must have not been found guilty of any violation involving moral turpitude, corruption, or fraud.	Certificate of no pending administrative/legal charges
 k. Has already finished his/her existing service obligation for a scholarship, if any. **in any case that the HRDD has no existing format, please use Enclosure 2 of this memo l. Has no pending application for retirement. 	Clearance from HRDD/NEAP
m. Must be able to render his/her service obligation vis- a- vis duration of the scholarship.	





QUALIFICATION AND OTHER REQUIRED DOCUMENT SET BY JICA

A. Essential Qualification

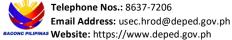
- 1. Current Duties: be engaged as a central/local educational administrative official responsible for basic education.
- 2. Experience in the relevant field: have at least 5 years of working experience in the field of education.
- 3. Educational Background: be a university graduate or equivalent.
- 4. Language: have a competent command of spoken and written English, since this training includes active participation in discussions among participants. (*Please attach an official certificate for English ability such as IELTs, TOEFL, TOEIC, if possible)
- 5. Technical Requirements:
 - Basic computer skills such as, sending/receiving email with attachments, using a web browser, creating presentation by utilizing Microsoft Word, Excel and PPT.
 - Web Conferences (Zoom), Cloud Storage (GIGAPOD), and YouTube. The ability to be self-directed in learning new technology skills are required.
- 6. Health: must be in good health to participate in the program in Japan. To reduce the risk of worsening symptoms associated with respiratory tract infection, please be honest to declare in the Medical History (QUESTIONNAIRE ON MEDICAL STATUS RESTRICTION of the application form) if you have been a patient of following illnesses; Hypertension / Diabetes / Cardiovascular illness / Heart failure / Chronic respiratory illness.

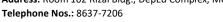
B. Recommended Qualification

- 1. Gender Equality and Women's Empowerment: JICA seeks more female applicants due to the past records of fewer applications from women. JICA is committed to promoting gender equality and women's empowerment, and provides equal opportunities for all applicants regardless of their sexual orientation or gender identity.
- 2. Difficulties/Disabilities: The participation of person with difficulties/disabilities is welcomed. Reasonable accommodation for persons with difficulties/disabilities will be made. Please write your situation in the Questionnaire on medical status restriction of the Application form. (Japan ratified the Convention on the Rights of Persons with Disabilities in January 2014 and JICA has observed it.)

C. Other Required Documents







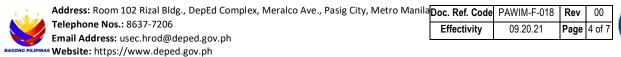
Address: Room 102 Rizal Bldg., DepEd Complex, Meralco Ave., Pasig City, Metro Manila Doc. Ref. Code PAWIM-F-018 Rev 09.20.21 Effectivity



- 1. Application Form: The Application Form is available at the JICA overseas office (or the Embassy of Japan) * If you have any difficulties/disabilities which require assistance, please specify necessary assistances in the QUESTIONNAIRE ON MEDICAL STATUS RESTRICTION (1-(c)) of the application form. Information will be reviewed and used for reasonable accommodation.
- 2. Photocopy of Passport (to be submitted with the application form): If you possess your passport which you will carry when entering Japan for this program. If not, you are requested to submit its photocopy as soon as you obtain it. *The following information should be included in the photocopy: Name, Date of Birth, Nationality, Sex, Passport Number and Expiry Date
- 3. English Score Sheet (to be submitted with the application form): Submit if the nominees have any official English examination scores. (e.g., TOEFLiBT, TOEIC, IELTs)
- 4. Organization chart: (to be submitted with the application form): Submit the chart of your organization indicating your department, division, section and your position with double line or highlight.

*Remarks: The Application Form and related documents (1) \sim (4) must be computer-printed, not handwritten.

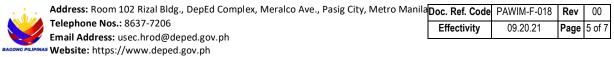
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SCHOLARSHIP CLEARANCE

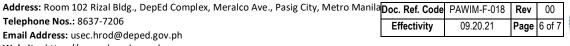
I. NAME			
II. Position/Designation			
III. Permanent Station			
IV. Has availed any	□ Yes		If yes, fill out sections V-X,
scholarship program	□ No		as applicable.
	Program Type	Tit	le of the Program
V. Scholarship Program	□ Degree		
	□ Non-Degree		
VI. Scholarship Duration			
VII. Status	Completed the course (Submit a copy of		Withdrawn from the Course
	Certificate of Completion)		(State the reason below)





VIII. Reason/s for Non-Completion (must be supported by attachments)	□ Resignation □ Transfer □ Retirement □ Others Explain further.		
IX. Service Obligation	No. of Months/Yrs Required	No. of Months/Yrs Completed	
X. Reason for Non- Completion	□ Resignation □ Tran	sfer Retirement Others	
(must be supported by attachments)	Explain further.		
I hereby attest that the information and correct	 n in this form and the support	ting documents attached hereto are true	
Name and Signature	of the Scholar	Date and Time	
This is to certify that the information in this form and the supporting documents attached hereto are true and correct		cuments attached hereto are true and correct	
Name and Signature of the Recommending Authority (SDO - HRDD)			
		Date and Time	





APPROVED	
Name and Signature of the Recommending Authority	
(RO-HRDD)	

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