



Republic of the Philippines  
**Department of Education**  
SOCCSKSARGEN REGION

March 18, 2024

REGION MEMORANDUM  
CLMD-2024-098

**CALL FOR NOMINATION FOR SEAMEO REGIONAL CENTRE FOR QITEP  
IN MATHEMATICS (SEAQiM) SCHOLARSHIP PROGRAMS FOR FY 2024**

To: Schools Division Superintendents

1. In reference to DepEd Memorandum DM-OUHROD-2024-0256, the Southeast Asian Ministers of Education Organization Regional Centre for Quality Improvement of Teachers and Education Personnel in Mathematics (SEAQiM) announces its five (5) regular courses for Mathematics teachers of SEAMEO Member Countries for FY 2024, with details as follows:

No.	Theme	Course Dates	Level	Mode	Deadline
1	Integrating ICT in Mathematics Education	April 22- May 22, 2024	Junior High School Mathematics Teachers	Online (In-on-in)	February 29, 2024
2	Teacher-made Mathematics Teaching Aid	April 24- May 7, 2024	Primary School Teachers	Face-to-Face	February 29, 2024
3	STEM Mathematics Learning	July 16-19, 2024	Junior High School Math Teachers	Face-to-Face	April 17, 2024
4	Southeast Asia Realistic Mathematics Education	August 5 – September 4, 2024	Primary School Teachers	Online (In-On-In)	May 15, 2024
5	Developing Lesson Study in Mathematics Education	October 15-28, 2024	Senior High School Math Teachers	Face-to-Face	August 15, 2024

2. The National Educators Academy of the Philippines (NEAP) encourages each Regional Office to nominate at least one (1) Mathematics teacher for each course. All nominees must meet the qualifications and submit the documentary requirements listed in **Enclosure 1** and secure a Scholarship Clearance found in **Enclosure 2**.

3. To secure endorsement from the region, interested applicants shall secure endorsement from the School Division Office and send the endorsement along with



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other documents to DepEd Regional Office through [region12@deped.gov.ph](mailto:region12@deped.gov.ph) copy furnished/carbon copy (cc) to Jay-ar S. Lipura through [jayar.lipura@deped.gov.ph](mailto:jayar.lipura@deped.gov.ph) **at least twenty (20) days before the national deadline.**

4. The Participant Nomination Form and required documents must be accomplished and uploaded (in PDF form) on or before the set deadlines, through the Microsoft Form which can be accessed through the link <https://forms.office.com/r/HDnVWe4Fwb>. Kindly use official DepEd email accounts in submitting the requirements.

5. It must be noted that applications may be disqualified due to various reasons, such as but not limited to incomplete requirements, lack of official endorsement/s, sending of application directly to Secretariat's email, discrepancies in the documents, etc.

6. For clarifications, contact **NEAP Scholarship Secretariat through email [scholarships@deped.gov.ph](mailto:scholarships@deped.gov.ph) and or landline (02) 8715-9919.**

7. For information and compliance.

  
**CARLITO D. ROCAFORT**  
Director IV

Enclosure: Enclosure 1: General Eligibility Requirements/Checklist, Enclosure 2: Scholarship Clearance

Reference: DM-OUHROD-2024-0256

Allotment: None

To be indicated in the PERPETUAL INDEX under the subject

SCHOLARSHIP

LEARNING AREA, MATHEMATICS

JRSL/CLMD / RM/ CALL FOR NOMINATION FOR SEAMEO REGIONAL CENTRE FOR QITEP IN MATHEMATICS  
(SEAQiM) SCHOLARSHIP PROGRAMS FOR FY 2024/99/ March 18, 2024



**Address:** Regional Center, Brgy. Carpenter Hill, City of Koronadal

**Telefax No.:** (083) 2288825/ (083) 2281893

**Website:** [depedroxii.org](http://depedroxii.org)

**Email:** [region12@deped.gov.ph](mailto:region12@deped.gov.ph)



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Enclosure 1 to Region Memorandum CLMD-2024-098

**GENERAL ELIGIBILITY REQUIREMENTS/CHECKLIST**

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

<b>Remarks (✓, ✗, others)</b>	<b>Eligibility</b>	<b>Documentary Requirements</b>
	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.	Latest rated performance rating with approved IDP
	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
	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)



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	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.	



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Enclosure 2 to Region Memorandum CLMD-2024-098

**SCHOLARSHIP CLEARANCE**

<b>I. NAME</b>		
<b>II. Position/Designation</b>		
<b>III. Permanent Station</b>		
<b>IV. Has availed any scholarship program</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, fill out sections V-X, as applicable.
<b>V. Scholarship Program</b>	<b>Program Type</b>	<b>Title of the Program</b>
	<input type="checkbox"/> Degree <input type="checkbox"/> Non-Degree	
<b>VI. Scholarship Duration</b>		
<b>VII. Status</b>	<input type="checkbox"/> <b>Completed the course</b>  (Submit a copy of Certificate of Completion)	<input type="checkbox"/> <b>Withdrawn from the Course</b>  (State the reason below)
	<b>VIII. Reason/s for Non-Completion</b> (must be supported by attachments)	
	<input type="checkbox"/> <b>Resignation</b> <input type="checkbox"/> <b>Transfer</b> <input type="checkbox"/> <b>Retirement</b> <input type="checkbox"/> <b>Others</b>  Explain further.	



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<b>IX. Service Obligation</b>	<b>No. of Months/Yrs Required</b>	<b>No. of Months/Yrs Completed</b>
<b>X. Reason for Non-Completion</b> (must be supported by attachments)	<input type="checkbox"/> <b>Resignation</b> <input type="checkbox"/> <b>Transfer</b> <input type="checkbox"/> <b>Retirement</b> <input type="checkbox"/> <b>Others</b>  <i>Explain further.</i>	
<i>I hereby attest that the information in this form and the supporting documents attached hereto are true and correct</i>		

Name and Signature of the Scholar		Date and Time
<i>This is to certify that the information in this form and the supporting documents attached hereto are true and correct</i>		
Name and Signature of the Recommending Authority (SDO - HRDD)		Date and Time
<b>APPROVED</b>		
Name and Signature of the Recommending Authority (RO-HRDD)		Date and Time