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OFFICE OF THE SCHOOLS DIVISION SUPERINTENDENT

Republic of the Philippines
Department of Education
Cordillera Administrative Region
SCHOOLS DIVISION OFFICE OF ABRA

Office of the Schools Division Superintendent

March 30, 2021

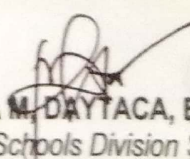
DIVISION MEMORANDUM

No. 126, s. 2021

GAWAD SIKLAB 2021: SEARCH FOR OUTSTANDING PROGRAM IMPLEMENTERS, STUDENT LEADERS, TEACHER-ADVISERS, SCHOOL HEADS, AND REGIONAL AND DIVISION YOUTH FORMATION COORDINATORS

To: CHIEF, School Governance and Operations Division
Education Program Supervisor, SGOD
Public Schools District Supervisors
Public Elementary School Heads
Public Secondary School Heads
SPG/SSG Teacher-Advisers
All others concerned

1. Pursuant to the Office of the Undersecretary for Administration (OUA) Memorandum No. 00-0321-0042 dated March 3, 2021, entitled: Gawad SIKLAB: Search for Outstanding Program Implementers, Student Leaders, Teacher-Advisers, School Heads, and Regional and Division Youth Formation Coordinators, this office strongly encourage all schools to take part in this search.
2. As part of nation-building, this activity aims to recognize the accomplishments and important contributions of the learners, teachers, administrators, and other stakeholders despite the pandemic we are facing. The said search is open to all public schools, school heads, student leaders and teacher-advisers of Supreme Pupil Government (SPG) and Supreme Student Government (SSG), Youth for Environment in Schools-Organization (YES-O), Gulayan sa Paaralan Program (GPP), Barkada Kontra Droga (BKD) and Regional and Division Youth Coordinators.
3. Relative to the said search, all forms are attached to this memo and submit your applications to the Youth Formation Section through the Youth Formation Coordinators, Mr. Celso T. Tacanay and Ms. Edlaine B. Castillo on or before May 14, 2021 for Division level screening.
4. For dissemination, guidance and strict compliance to this memorandum is desired.


BENILDA M. DAYTACA, EdD. CESO VI
Assistant Schools Division Superintendent
OIC-Office of the Schools Division Superintendent

memoYF/ebc



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ISO 9001:2015 Certified
Quality Management System
CRN 50500994 QM15



Region: _____

Division: _____

PROFILE

Name of Nominee:

Address of the School (if applicable):

Telephone/ Fax Number/CP Number:

Email Address:

School Population (if applicable):

CONTACT PERSON DATA (if applicable)

Full Name:

Surname

First Name

Middle Name

Name Extension (Jr, Sr, III)

Home Address:

Date of Birth:

Position in the Organization:

Contact Number:

PROJECT PROFILE

Project Title:

Brief Description (2 sentences):

Project Launch Date:

Category (Please Check one only)

- Maka-Diyos (Belief and Tradition) – School
- Maka-Tao (Human Development, Health, Well-Being) -School
- Makakalikasan(Environment and Disaster Risk Reducation Management) - School
- Makabansa (Heritage, Culture, Nationalism, Patriotism and Volunteerism) - School
- Most Outstanding Student Leader
- Most Outstanding Teacher-Adviser
- Recognition Award for School Head

I hereby certify upon my honor that all facts and information indicated herein are true and correct to the best of my knowledge. I further declare that any information given that proves to be untrue may constitute a ground for disqualification in the search and prosecution for perjury. Further, I subscribe and agree that the Department of Education have the sole prerogative to select the winners, and that their decision is final and executory.

In witness hereof, I am executing and signing this statement voluntarily and without compulsion.

Signature Over Printed Name

ENCLOSURE 1: APPLICATION AND EDORSEMENT FORMS



FORM 2
Application
Form for
YES-O/GPP

Region: _____

Division: _____

PROFILE

Name of Nominee: _____

Address of the School (if applicable): _____

Telephone/ Fax Number/CP Number: _____

Email Address: _____

School Population (if applicable): _____

CONTACT PERSON DATA (if applicable)

Full Name: _____

Surname	First Name	Middle Name	Name Extension (Jr, Sr, III)

Home Address: _____

Date of Birth: _____

Position in the Organization: _____

Contact Number: _____

PROJECT PROFILE

Project Title: _____

Brief Description (2 sentences): _____

Project Launch Date: _____

Category (Please Check one only)

<input type="checkbox"/>	Most Outstanding YES-O Implementer – School
<input type="checkbox"/>	Most Outstanding YES-O Student Leader
<input type="checkbox"/>	Most Outstanding YES-O Teacher Adviser
<input type="checkbox"/>	School Head Recognition Award for YES-O
<input type="checkbox"/>	Most Outstanding Gulayan sa Paaralan Program Implementer - School

I hereby certify upon my honor that all facts and information indicated herein are true and correct to the best of my knowledge. I further declare that any information given that proves to be untrue may constitute a ground for disqualification in the search and prosecution for perjury. Further, I subscribe and agree that the Department of Education have the sole prerogative to select the winners, and that their decision is final and executory.

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Signature Over Printed Name

ENCLOSURE 1: APPLICATION AND EDORSEMENT FORMS



FORM 3
Application
Form for BKD

Region: _____
Division: _____

PROFILE

Name of Nominee: _____
Address of the School (if applicable): _____
Telephone/ Fax Number/CP Number: _____
Email Address: _____
School Population (if applicable): _____

CONTACT PERSON DATA (if applicable)

Full Name: _____

Surname	First Name	Middle Name	Name Extension (Jr, Sr, III)

Home Address: _____
Date of Birth: _____
Position in the Organization: _____
Contact Number: _____

PROJECT PROFILE

Project Title: _____
Brief Description (2 sentences): _____
Project Launch Date: _____
Category (Please Check one only)

<input type="checkbox"/>	Best BKD Implementer - School
<input type="checkbox"/>	Most Outstanding BKD Student Leader
<input type="checkbox"/>	Most Outstanding BKD Teacher Adviser
<input type="checkbox"/>	School Head Recognition BKD Award

I hereby certify upon my honor that all facts and information indicated herein are true and correct to the best of my knowledge. I further declare that any information given that proves to be untrue may constitute a ground for disqualification in the search and prosecution for perjury. Further, I subscribe and agree that the Department of Education have the sole prerogative to select the winners, and that their decision is final and executory.

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Signature Over Printed Name

ENCLOSURE 1: APPLICATION AND EDORSEMENT FORMS

ATTACHMENTS:

Please use a separate sheet

A. Essay (Maximum Number of Pages 5):

1. Describe your project entry (Limit to 500 words and in one page)
2. How does the project address the problem of the school/ community? (Limit the answer to 300 words and half page.)
3. Who and how many are the beneficiaries of the project? How did they benefit from the project? (Limit the answer to 300 words and half page.)
4. What is the impact of the project to the stakeholders? (Limit the answer to 500 words and in one page.)
5. Who are involved and what are their role to the project? (Limit to the answer to 300 words and half page.)
6. How does the project promote the idea of teamwork and solidarity among its stakeholders? (Limit to the answer to 300 words and half page.)
7. What innovation did the team introduce in implementing the project? (Limit to the answer to 300 words and half page.)
8. How were the team able to fund the project? (Limit to the answer to 300 words and half page.)

B. Photo Documentation (Maximum Number of Pages: 2)

C. List of Officers (if applicable)

NOTE:

1. **Advisers should be the one who will sign and pass the entry/ application form to the Division Office in lieu of the student leader/s.**
2. **Non-compliance to the Search Requirements will result to automatic disqualification.**