



Republic of the Philippines
Department of Education
REGION I



REGIONAL MEMORANDUM
No. 491, s. 2024

**CALL FOR NOMINATION FOR SEAMEO VOCTECH SPECIALIST SKILLS
UPGRADING: ROBOTIC AND SMART SYSTEM**

To: Schools Division Superintendents

1. The Southeast Asian Ministers of Education Organization Regional Centre for Vocational and Technical Education and Training (SEAMEO VOCTECH) announces its training scholarship offering titled Specialist Skills Upgrading: Robotic and Smart System.
2. The course details are as follows:

Course Title	Specialist Skills Upgrading: Robotic and Smart System
Course Schedule	June 24-July 5, 2024
No. of Slots	1
Modality	Face to Face
Target Participants and Qualifications	* Program leaders or highly committed and motivated teachers or trainers of Robotic and Smart System * Existing trainers with basic technical expertise or experience in the said area
Deadline of Submission	May 2, 2024

3. The Schools Division Offices (SDOs) are encouraged to nominate one qualified applicant. Nominees must meet the qualifications and submit documentary requirements listed in Enclosure 1. The Scholarship Clearance (Enclosure 2) should also be submitted.
4. Nominees shall complete the screening form and other required documents and upload them via this link: <https://tinyurl.com/SEAMEO-VOCTECH> on or before the deadline.
5. 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 the Secretariat's email, and discrepancies in documents among others.

6. For queries or concerns, please contact the Human Resource Development Division (HRDD) through (072) 682-23-24.

7. For wide dissemination and immediate action.

For the Regional Director:


RHODA T. RAZON
Director III

Reference: DM-OUHROD-2024-0792

Encl: as stated

To be indicated in the Perpetual Index
under the following subjects:

PROGRAMS

SCHOLARSHIPS

HRDD/vrdg/RM_ SEAMEO-VOCTECHROBOTIC
April 30, 2024



RM_ Call for Nomination for SEAMEO VOCTECH Specialist Skills Upgrading: Robotic and Smart System

COURSE TITLE
Application of (NAME of NOMINEE)

Region: _____

Submitted on (DATE and TIME)

1. Email Addresses:	
2. Training Course:	
3. Contact Numbers:	
4. Designation/Position:	
5. Workstation: (School/Office Unit)	
6. School Division Office:	
7. Religion:	
8. Age:	
9. Number of years in DepEd:	
10. Work experience/s related to Leadership: (indicate the highlights and duration.)	
11. Outstanding accomplishments: (Max of 5)	
12. Educational attainment (indicate school, program, specialization, and title of Thesis/Dissertation, if any.)	
13. What were the challenges you experienced as a teacher? What did you learn from them?	
14. What initiatives do you plan to implement so your school will benefit from this program?	
15. How did you hear about this scholarship opportunity?	

GENERAL ELIGIBILITY REQUIREMENTS/CHECKLIST

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

Remarks (✓, X, others)	Eligibility	Documentary Requirements
	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. c. Must present his/her Individual Development Plan (IDP) that is validated by the head of the office.	Latest rated performance rating with approved IDP
	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). g. Must have no current or pending enrollment in other institutions for graduate or postgraduate degree programs (for degree programs).	Updated Personal Data Sheet
	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.	

SCHOLARSHIP CLEARANCE

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

IX. Service Obligation	No. of Months/Yrs Required	No. of Months/Yrs Completed
X. Reason for Non-Completion (must be supported by attachments)	<input type="checkbox"/> Resignation <input type="checkbox"/> Transfer <input type="checkbox"/> Retirement <input type="checkbox"/> Others <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

This is to certify that the information in this form and the supporting documents 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)

Date and Time