



Republic of the Philippines
Department of Education
REGION X
DIVISION OF CAGAYAN DE ORO CITY

Office of the Schools Division Superintendent

May 27, 2020

Division Memorandum
No. 257 s. 2020

DEP ED-DIVISION OF CAGAYAN DE ORO CITY
CAGAYAN DE ORO CITY
RELEASED
DATE: MAY 28 2020

To: Assistant Schools Division Superintendent
Public Schools District Supervisors
Public Elementary and Secondary School Heads
Teaching and Non-teaching Personnel
All Other Concerned
This Division

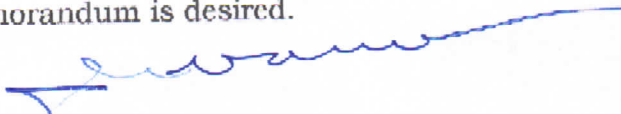
Public School Enrolment Guidelines for School Year 2020-2021

1. In compliance with DepEd Order No. 7, s. 2020 and Regional Memorandum No. 206, s. 2020, schools shall conduct enrollment from June 1-30, 2020 for **all learners** intending to attend SY 2020-2021, **including those who enrolled during the early registration period**, given that circumstances have changed substantially.
2. Schools are expected to conduct activities in preparation for the enrollment and in reaching prospective registrants which may include but not limited to the following:
 - a. Information campaigns (e.g. text brigades, social media posts, public announcements, tarpaulins)
 - b. Meeting/coordination with barangay officials, Parent Teacher Association (PTA), civic organizations, and;
 - c. Conduct enrolment through different modalities such as Drop Box, Text, Face-to-Face and Online Platforms (e.g. Email, FB Messenger, Google Forms). Refer to Attachment 1 for Enrollment Guidelines.
3. To ensure the effective implementation of enrollment, all shall note the following reminders:
 - a. School Heads shall designate enrollment focal persons (EFPs) and establish registration centers in the school/learning premises;
 - b. Schools shall reproduce the LESF and disseminate soft copies of the same through various online portals;
 - c. Teachers shall encode the accomplished Learner Enrollment and Survey Form (LESF) in the Learner Information System (LIS) enrollment module which shall be deployed on **June 8, 2020**. Schools shall complete their encoding of LESF not later than **July 7, 2020**. A separate memo shall be issued relative to the encoding in the LIS.



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4. Parents who enrolled their learners through online and text are required to submit the accomplished LESF on or before **June 30, 2020** through email, FB messenger or drop boxes in the designated areas or in the school premises.
5. For this School Year, cut-off age for kindergarten learners should be five (5) years old as of **October 31** (DepEd Order No. 20, s. 2018).
6. For ALS, enrollees shall communicate their intent to enroll via digital and/or physical enrollment platforms established by schools and barangays with community learning centers (CLC). The form to be used is **ALS Form 2** based on DepEd Order No. 58, s. 2017.
7. Deadline for the submission of documentary requirements under Section V-A of DO No. 3, s. 2018 shall be deferred to **December 2020**. Only schools and their personnel shall coordinate the transmission of learners' records, whether internally (e.g. between a learner's previous and incoming class advisers) or externally (i.e. between schools). Schools shall not compel learners and parents/guardians to take responsibility for the transfer of records.
8. School officials shall post the list of enrolled learners in public places, including social media, website and bulletin boards.
9. The School Governance Operations Division and Public Schools District Supervisors (PSDSs) shall conduct monitoring, provide technical assistance and gather issues, best practices and feedback relative to the conduct of enrollment.
10. All enrollment activities shall comply with the minimum health standards set by DepEd, consistent with guidelines of the Department of Health (DOH), Inter-Agency Task Force for the Management of Emerging Infectious Diseases (IATF) and Office of the President (OP).
11. Expenses relative to the conduct of enrollment shall be charged to local funds, subject to existing auditing and accounting rules and regulations.
12. Immediate and wide dissemination of this Memorandum is desired.


CHERRY MAE L. LIMBACO
Schools Division Superintendent

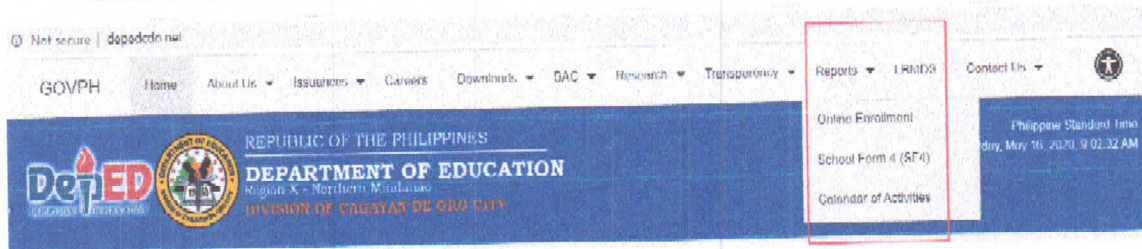


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Enrolment Guidelines

A. Online Enrollment

1. Parents shall access the Online Enrollment Form through www.depedcdo.net under the Reports Tab in the Main Menu.



2. Parents shall input the required information by clicking the "Online Enrollment" option.
3. The SGOD-Planning and Research Section shall email the generated Online Enrollment data to the schools.

B. Enrollment through Text Message (SMS)

1. School Heads shall publish an official cellphone number for enrollment purposes through social media, public announcements and other information materials.

2. Parents shall enroll the learners through text message using this format:

Elementary & Junior High School

Learners Name (Last Name, First Name, Middle Name, Extension Name) <space> Birth Date (mm-dd-yyyy) <space>Grade Level to be enrolled

Example: Neri,Rodner,Ratilla_07-20-2013_Grade2

Senior High School

Learners Name (Last Name, First Name, Middle Name, Extension Name) <space> Birth Date (mm-dd-yyyy) <space>Grade Level to be enrolled<space>Track <space> Strand

Example:

Cruz,Marc,Pinto_08-24-2004_Grade11_GAS

Cruz,Marc,Pinto_08-24-2004_Grade11_TVL_CropProduction

3. The Enrollment Focal Person (EFP) shall reply to confirm that the learner has been officially enrolled for SY 2020-2021 and instruct the parent/s to submit the accomplished LESF (Enclosure 4 of DO No. 7, s. 2020) on/or before **June 30, 2020**.

C. Enrollment through Drop Box

1. School Head shall provide drop boxes to designated areas in the community (barangay hall, sitio hall, community learning centers, etc.) Refer to Attachment 2 for sample dropbox designs.

2. Enrollees and/or their parents/guardians shall fill-in the data required in the Learner Enrolment and Survey Form. Accomplished forms shall be dropped in the boxes provided.
3. Schools shall regularly deploy and retrieve Learner Enrolment and Survey Forms to the designated areas.

D. Enrollment through FB Messenger

1. School Heads shall provide and publish an official FB account or FB page for enrolment purposes.
2. Parents shall send the following data through private chat box of the official FB account or page of their preferred school:
 - Elementary and Junior HS**
Learners Name (Last Name, First Name, Middle Name, Extension Name)
Birthdate
Grade level to be enrolled
 - Senior High School**
Learners Name (Last Name, First Name, Middle Name, Extension Name)
Birthdate
Grade level to be enrolled
Track
Strand
3. The Enrollment Focal Person (EFP) shall reply to confirm that the learner has been officially enrolled for SY 2020-2021 and instruct the parent/s to submit the accomplished LESF (Enclosure 4 of DO No. 7, s. 2020) on/or before **June 30, 2020**.

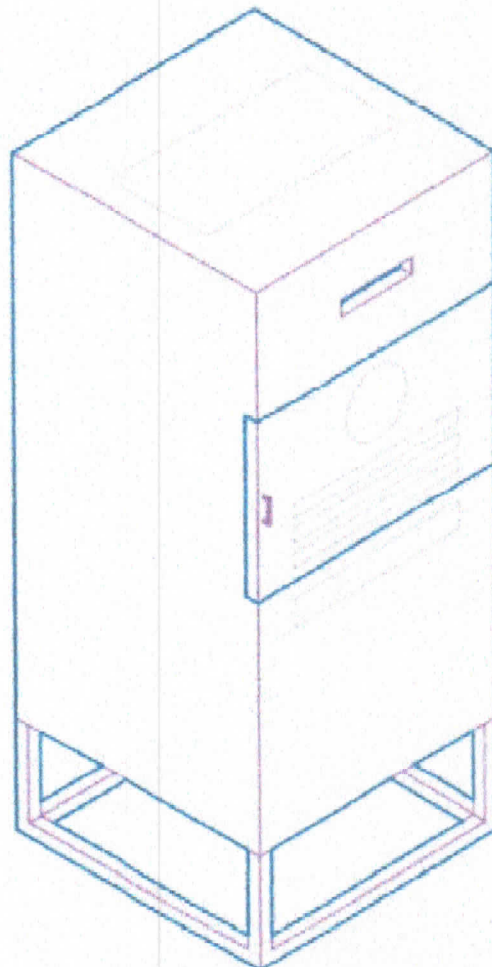
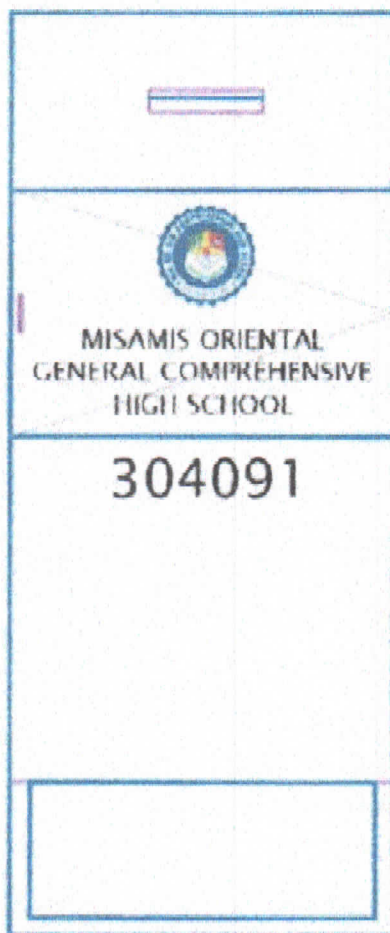
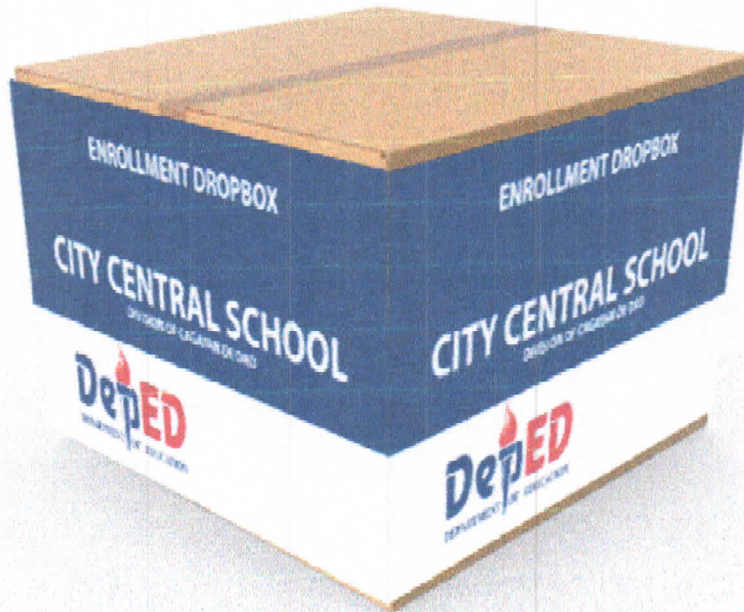
E. Enrollment through Email

1. School Heads shall provide and publish an official email for enrolment purposes.
2. Parents/guardians shall send a scanned copy or a picture of the accomplished form to the school's official email address.
3. The Enrollment Focal Person (EFP) shall reply to confirm that the learner has been officially enrolled for SY 2020-2021.

F. Face-to-Face Enrollment

1. Face to face enrollment shall be guided by the minimum health and safety standard set by the IATF.
2. Only parents/guardians shall be allowed to enroll their children.

Sample Dropbox Designs





LEARNER ENROLLMENT AND SURVEY FORM

THIS FORM IS NOT FOR SALE

Instructions:

1. This enrollment survey shall be answered by the parent/guardian of the learner.
2. Please read the questions carefully and fill in all applicable spaces and write your answers legibly in CAPITAL letters. For items not applicable, write N/A.
3. For questions/ clarifications, please ask for the assistance of the teacher/ person-in-charge.

A. GRADE LEVEL AND SCHOOL INFORMATION

A1. School Year - A2. Check the appropriate boxes only No LRN With LRN A3. Returning (Balik-Aral)

A4. Grade Level to enroll: _____ A7. Last School Attended: _____ A8. School ID: _____ A11. School to enroll in: _____ A12. School ID: _____

A5. Last grade level completed: _____ A9. School Address: _____ A13. School Address: _____

A6. Last school year completed: _____ A10. School Type: Public Private

FOR SENIOR HIGH SCHOOL ONLY:
A14. Semester (1st/2nd): _____ A15. Track: _____ A16. Strand (if any): _____

B. STUDENT INFORMATION

B1. PSA Birth Certificate No. (if available upon enrollment) B2. Learner Reference Number (LRN)

B3. LAST NAME

B4. FIRST NAME

B5. MIDDLE NAME

B6. EXTENSION NAME e.g. Jr., III (if applicable)

B7. Date of Birth / /

B8. Age B9. Sex Male Female

B10. Belonging to Indigenous Peoples (IP) Community/Indigenous Cultural Community Yes No

B11. If yes, please specify: _____

B12. Mother Tongue: _____

B13. Religion: _____

For Learners with Special Education Needs

B14. Does the learner have special education needs?
 Yes No

B15. If yes, please specify: _____

B16. Do you have any assistive technology devices available at home? (i.e. screen reader, Braille, DAISY)
 Yes No

B17. If yes, please specify: _____

ADDRESS

B18. House Number and Street _____ B19. Barangay _____

B20. City/ Municipality _____ B21. Province _____ B22. Region _____

C. PARENT/ GUARDIAN INFORMATION

Father		Mother	Guardian
C1. Full Name (surname, full name, middle name)	C7. Full Maiden Name (surname, full name, middle name)	C13. Full Name (surname, full name, middle name)	
C2. Highest Educational Attainment <input type="checkbox"/> Elementary graduate <input type="checkbox"/> High School graduate <input type="checkbox"/> College graduate <input type="checkbox"/> Vocational <input type="checkbox"/> Master's/Doctorate degree <input type="checkbox"/> Did not attend school	C8. Highest Educational Attainment <input type="checkbox"/> Elementary graduate <input type="checkbox"/> High School graduate <input type="checkbox"/> College graduate <input type="checkbox"/> Vocational <input type="checkbox"/> MASTER/DOCTORAL DEGREE <input type="checkbox"/> Did not attend school	C14. Highest Educational Attainment <input type="checkbox"/> Elementary graduate <input type="checkbox"/> High School graduate <input type="checkbox"/> College graduate <input type="checkbox"/> Vocational <input type="checkbox"/> Master's/Doctorate degree <input type="checkbox"/> Did not attend school	
C3. Employment Status <input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Self-employed (i.e. family business) <input type="checkbox"/> Unemployed due to ECD <input type="checkbox"/> Not working	C9. Employment Status <input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Self-employed (i.e. family business) <input type="checkbox"/> Unemployed due to ECD <input type="checkbox"/> Not working	C15. Employment Status <input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Self-employed (i.e. family business) <input type="checkbox"/> Unemployed due to ECD <input type="checkbox"/> Not working	
C4. Working from home due to ECD? <input type="checkbox"/> Yes <input type="checkbox"/> No	C10. Working from home due to ECD? <input type="checkbox"/> Yes <input type="checkbox"/> No	C16. Working from home due to ECD? <input type="checkbox"/> Yes <input type="checkbox"/> No	
C5. Contact number/s (cellphone/ telephone)	C11. Contact number/s (cellphone/ telephone)	C17. Contact number/s (cellphone/ telephone)	



D. HOUSEHOLD CAPACITY AND ACCESS TO DISTANCE LEARNING

D1. How does your child go to school? Choose all that applies.

- walking
 public commute (land/ water)
 family-owned vehicle
 school service

D2. How many of your household members (including the enrollee) are studying in School Year 2020-2021? Please specify each.

- Kinder _____ Grade 4 _____ Grade 8 _____ Grade 12 _____
 Grade 1 _____ Grade 5 _____ Grade 9 _____ Others _____
 Grade 2 _____ Grade 6 _____ Grade 10 _____ (e.g. college, vocational, etc.)
 Grade 3 _____ Grade 7 _____ Grade 11 _____

D3. Who among the household members can provide instructional support to the child's distance learning? Choose all that applies.

- parents/ guardians
 others (tutor, house helper)
 elder siblings
 none
 grandparents
 able to do independent learning
 extended members of the family

D4. What devices are available at home that the learner can use for learning? Check all that applies.

- cable TV
 radio
 non-cable TV
 desktop computer
 basic cellphone
 laptop
 smartphone
 none
 tablet
 others: _____

D5. Do you have a way to connect to the internet?

- Yes
 No
 (If NO, proceed to D7)

D6. How do you connect to the internet? Choose all that applies.

- own mobile data
 own broadband internet (DSL, wireless fiber, satellite)
 computer shop
 other places outside the home with internet connection (library, barangay/ municipal hall, neighbor, relatives)
 none

D7. What distance learning modality/ies do you prefer for your child? Choose all that applies.

- online learning
 modular learning
 television
 combination of face to face with other modalities
 radio
 others: _____

D8. What are the challenges that may affect your child's learning process through distance education? Choose all that applies.

- lack of available gadgets/ equipment
 conflict with other activities (i.e., house chores)
 insufficient load/ data allowance
 high electrical consumption
 unstable mobile/ internet connection
 distractions (i.e., social media, noise from community/neighbor)
 existing health condition/s
 others: _____
 difficulty in independent learning

I hereby certify that the above information given are true and correct to the best of my knowledge and I allow the Department of Education to use my child's details to create and/or update his/her learner profile in the Learner Information System. The information herein shall be treated as confidential in compliance with the Data Privacy Act of 2012.

Signature Over Printed Name of Parent/Guardian

Date

For use of DepEd Personnel Only. To be filled up by the Class Adviser.

DATE OF FIRST ATTENDANCE
(Month/Day/Year)

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Grade Level

Track (for SHS)



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