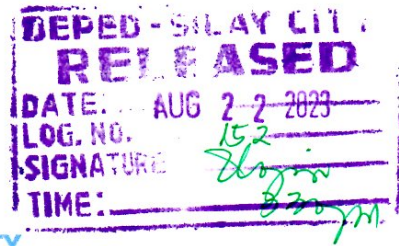




Republic of the Philippines
Department of Education
REGION VI – WESTERN VISAYAS
SCHOOLS DIVISION OF SILAY CITY



August 22, 2023

DIVISION MEMORANDUM

No. 316, s. 2023

**REGISTRATION FOR THE 2023 SPECIAL PHILIPPINE EDUCATIONAL
PLACEMENT TEST (PEPT) FOR SCHOOL YEAR 2023-2024**

To: OIC - Asst. Schools Division Superintendent
Chief Education Supervisors
Education Program Supervisors
Public Schools District Supervisors
Public and Private School Heads
All others concerned.

1. As per notice from the Bureau of Education Assessment (BEA), the registration on **2023 Special Philippine Educational Placement Test (PEPT)** shall commence this August and the test administration will be on October, 2023.
2. Due to the limited allocation of 128 registrants only for our Schools Division, quota will be prorated among the districts. The Public Schools District Supervisors, together with the school heads may consider prioritizing the following test takers:
 - a. learners who are candidate for graduation this school year (Gr.6 and 10)
 - b. Incoming Grade 1 learners with no Kinder records
 - c. Transferees with discrepancies in school records
 - d. over-aged learners (with an extreme age-gap to their current grade level)
3. The following are the documentary requirements:
 - a. **completed Registration Form** (for Free- see attachment)
 - b. Original and one photocopy of the **Birth Certificate** (duly authenticated and issued by the PSA or by the LCR)
 - c. original and photocopy of the permanent school record (SF10/ Form 137) signed by the school principal/administrator/principal
 - d. 2 pcs. identical and recently taken **1X1 colored ID pictures** with name tag (family name, first name, middle initial) and white background.
4. Qualified registrants shall be encoded on a link to be forwarded to the PSDS, and the hard copy of pertinent documents be submitted not later than September 1, 2023. Only those with complete requirements will be considered



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for the final list of registrants to be forwarded to the Bureau of Education Assessment (BEA) for material allocation.

5. Attached are the PEPT Registration Form and the Registration Qualification Guide for reference.
6. It is understood that in the conduct of this activity, there shall be no discrimination on account of age, school, gender, civil status, disability, religion, or any other similar factor/circumstances that run counter to the principles of equal opportunity.
7. Immediate and widest dissemination of this Memorandum is desired.


SALVADOR O. OCHAVO JR. EdD, CESO V
Schools Division Superintendent

Encl: As stated.

Reference:

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

ASSESSMENT

LEARNERS



Republic of the Philippines
Department of Education
BUREAU OF EDUCATION ASSESSMENT

*** LEM's Copy ***

SPECIAL PHILIPPINE EDUCATIONAL PLACEMENT TEST

REGISTRATION FORM

Name of Registrant/ Examinee		Last Name		First Name		M.I.	
Mailing Address		No., Street, Barrio, Town, Province/City		Age	Sex	Person with Disability (PWD)	
Date of Birth (Month/Date/Year)		Contact Number		Date of Examination (Month/Date/Year)			
Name and Address of School Last Attended		Last Grade Level Completed		Grade Level/s to Take			
		<i>To be filled out by the Division Testing Coordinator</i>		<i>To be filled out by the Division Testing Coordinator</i>			
Place and Date of Registration				Examination Center			
<div style="border: 1px solid black; padding: 5px; width: fit-content;">1" x 1" Picture</div> <p style="text-align: center;">INSTRUCTIONS TO THE PEPT TESTING COORDINATOR</p> <ol style="list-style-type: none"> Before signing this form, please ensure that all entries on Age, Last Grade Level Completed, and Grade Level/s to Take are legible and correct. Detach Registrant's Copy and give it to the applicant. To verify the Identification of the registrant, keep the LEM's Copy and give it to the Chief Examiner on the examination day. NO REGISTRATION FEE <p>I hereby declare under oath that I have personally accomplished this Registration Form and that by affixing my name below, I am certifying that all documents attached to this application are a faithful reproduction of the original, and that all statements and information provided therein are complete, accurate, and correct to the best of my knowledge. I am assuming full responsibility and accountability for the correctness of the details provided and for the document's authenticity.</p> <p style="text-align: center;">_____ Signature over Printed Name of Registrant/Examinee</p>				<i>To be filled out by the Division Testing Coordinator</i> CHECK DOCUMENTS SUBMITTED			
				<p style="text-align: center;">For NEW PEPT REGISTRANTS</p> <p><input type="checkbox"/> Birth Certificate (NSO/PSA or Local Civil Registrar)</p> <p><input type="checkbox"/> School Records (SF10/E137 signed by the School Principal/Registrar/Administrator)</p> <p><input type="checkbox"/> Identical and recently taken 1x1 colored ID pictures with name tag (2pcs.)</p>			
				<p style="text-align: center;">For retakers and PEPT passers only</p> <p><input type="checkbox"/> Certificate of Rating (COR)</p> <p><input type="checkbox"/> Identical and recently taken 1x1 colored ID pictures with name tag (2pcs.)</p>			
				<p style="text-align: center;">Additional requirements for PEPT Validation purposes only</p> <p><input type="checkbox"/> Endorsement Letters</p> <p><input type="checkbox"/> School Division Office</p> <p><input type="checkbox"/> Regional Office</p>			

2023



Republic of the Philippines
Department of Education
BUREAU OF EDUCATION ASSESSMENT

*** Registrant's Copy ***

SPECIAL PHILIPPINE EDUCATIONAL PLACEMENT TEST

REGISTRATION FORM

Name of Registrant/ Examinee		Last Name		First Name		M.I.	
Mailing Address		No., Street, Barrio, Town, Province/City		Age	Sex	Person with Disability (PWD)	
Date of Birth (Month/Date/Year)		Contact Number		Date of Examination (Month/Date/Year)			
Name and Address of School Last Attended		Last Grade Level Completed		Grade Level/s to Take			
		<i>To be filled out by the Division Testing Coordinator</i>		<i>To be filled out by the Division Testing Coordinator</i>			
Place and Date of Registration				Examination Center			
<div style="border: 1px solid black; padding: 5px; width: fit-content;">1" x 1" Picture</div> <p style="text-align: center;">NOTES:</p> <ol style="list-style-type: none"> Upon registration, the Registration Officer will inform you of the examination date and venue. Complete all the information in the Registration Form. On the examination day, the examinee must be in the venue at 7:30 A.M. Bring this form and at least two (2) pieces no. 2 pencils. <p style="text-align: center;">Certified True and Correct:</p> <p style="text-align: center;">_____ DIVISION TESTING COORDINATOR Signature Over Printed Name</p>							

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PEPT REGISTRATION QUALIFICATION

Grade/Year Level Passed/Completed	Normal age (at the end of the SY)	Age on the date of Examination	Grade/Year Level to be Tested (as starting level)
None (No Schooling)	-	At least 6 years old	Kinder
Kinder	6 years old	At least 7 years old	Grade 1
Grade 1	7 years old	At least 8 years old	Grade 2
Grade 2	8 years old	At least 9 years old	Grade 3
Grade 3	9 years old	At least 10 years old	Grade 4
Grade 4	10 years old	At least 11 years old	Grade 5
Grade 5	11 years old	At least 12 years old	Grade 6
Grade 6	12 years old	At least 13 years old	Grade 7
Grade 7	13 years old	At least 14 years old	Grade 8
Grade 8	14 years old	At least 15 years old	Grade 9
Grade 9	15 years old	At least 16 years old	Grade 10