





MOV 04 2021

G E T TO E BION

#### Renublika na Wilininas

#### Kagawaran ng Edukasyon

Tanggapan ng Pangalawang Kalihim

OUA MEMO 00-1121-0035 MEMORANDUM

For:

Regional Directors and BARMM Education Minister Schools Division Superintendents Regional Youth Formation Coordinators School Heads All Others Concerned

THIRD NATIONAL SUMMIT ON THE RIGHTS OF THE CHILD IN EDUCATION AND PRE-SUMMIT CONFERENCE OF CHILDREN AND LEARNERS

The Child Rights in Education Desk (CREDe) under the Office of the Undersecretary for Legal Affairs will conduct the Pre-Summit Conference of Children and Learners on 17 November 2021 and Third National Summit on the Rights of the Child in Education on 25-26 November 2021 via a virtual platform.

In this light, the Office of the Undersecretary for Administration (OUA), through the Bureau of Learner Support Services – Youth Formation Division (BLSS-YFD), requests all Regional Youth Formation Coordinators (RYFCs) to participate in the said event.

All RYFCs are hereby directed to assist in identifying, coordinating, and nominating ten (10) learners from each region who will participate in the activity. Please see Annex for more details. All participants shall register via the link <a href="https://forms.gle/diYxHanL4fDonNCX7">https://forms.gle/diYxHanL4fDonNCX7</a> on or before 13 November 2021.

Further, RYFCs shall serve as guardians of the identified student-participants during the said events. As guardians, they shall address the concerns of learners in coordination with BLSS-YFD and the organizing team, OULA-CREDe.

It is also requested that the focal persons provide the names of the identified learners with prior consent of their parents/guardians using the form provided in **Annex B on** or **before 13 November 2021** and submit them to Mr. Paulo Anthony J. Mendoza of CREDe via email at paulo.mendoza001@deped.gov.ph (cc: <a href="mailto:childrights@deped.gov.ph">childrights@deped.gov.ph</a>, oula@deped.gov.ph and <a href="mailto:blss.yfd@deped.gov.ph">blss.yfd@deped.gov.ph</a>).

The link to the event will be sent to the learners and RYFCs upon confirmation of their participation. Other concerns and questions can also be coursed through the above email addresses.





Office of the Undersecretary for Administration (OUA) |Administrative Service (AS), Information and Communications Technology Service (ICTS Disaster Risk Reduction and Management Service (DRRMS), Bureau of Learner Support Services (BLSS), Baguio Teachers Camp (BTC), Central Security & Safety Office (CSSO)|

Department of Education, Central Office, Meralco Avenue, Pasig City Rm 519, Mabini Bldg; Mobile: +639260320762; Tel: (+632) 86337203, (+632) 86376207 Email: usec.admin@deped.gov.ph; Facebook/Twitter @depedtayo



Republic of the Philippines DEPARTMENT OF COUCATION Cordillera Administrative Region

DEPARTMENT OF EDUCATION RECORDS SECTION, REGION AL OFFICE - CAR NOV 05

November 5, 2021

To

Schools Division Superintendents All Division

For information, guidance and appropriate action

ESTELA LEON-CARIÑO, EdD, CESO III

Director IV/Regional Director

For the Regional Director:

FLORANTE E. VERGARA OIC-Office of the Assistant Regional Director

ESSD/EHM/jbb







NOV 04 2021

TIME:

### Republika ng Pilipinas

# Kagawaran ng Edukasyon

Tanggapan ng Pangalawang Kalihim

## OUA MEMO 00-1121-0035 MEMORANDUM

03 November 2021

For:

Regional Directors and BARMM Education Minister

**Schools Division Superintendents** 

**Regional Youth Formation Coordinators** 

**School Heads** 

**All Others Concerned** 

Subject:

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**EDUCATION AND PRE-SUMMIT CONFERENCE OF CHILDREN** 

AND LEARNERS

The Child Rights in Education Desk (CREDe) under the Office of the Undersecretary for Legal Affairs will conduct the **Pre-Summit Conference of Children and Learners** on **17 November 2021** and **Third National Summit on the Rights of the Child in Education** on **25-26 November 2021** via a virtual platform.

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#### Office of the Undersecretary for Administration (OUA)

[Administrative Service (AS), Information and Communications Technology Service (ICTS) Disaster Risk Reduction and Management Service (DRRMS), Bureau of Learner Support Services (BLSS), Baguio Teachers Camp (BTC), Central Security & Safety Office (CSSO)]

Department of Education, Central Office, Meralco Avenue, Pasig City Rm 519, Mabini Bldg; Mobile: +639260320762; Tel: (+632) 86337203, (+632) 86376207 Email: usec.admin@deped.gov.ph; Facebook/Twitter @depedtayo For questions or concerns, please contact Mr. Adolf P. Aguilar, Chief of BLSS-YFD, through 8637 9814 or email at blss.yfd@deped.gov.ph.

For immediate dissemination and compliance.

ALAIN DELAB. PASCUA Undersecretary





#### Annex A

## Sample Matrix of Distribution of Participants

## Regional Federation Supreme Student Government (RFSSG)

• Must be composed of 2 males and 2 females

No.	Name	Region/Division	School	Age	Email Address
1					
2					1-
3					
4					

## Division Federation Supreme Student Government (DFSSG)

• Must be composed of 2 males and 2 females

No.	Name	Region/Division	School	Age	Email Address
1					
2					
3					
4					

## Indigenous People (IP) Learner

Must be composed of 1 male and 1 female

No.	Name	Region/Division	School	Age	Email Address
1					
2					

# CONSENT, WAIVER, INDEMNITY and RELEASE

(TO BE COMPLETED BY YOUNG PERSON AND PARENT/GUARDIAN)

#### PART A: TO BE COMPLETED BY THE CHILD

I agree to participate in the following activity:

Production Name/Project Title: THIRD NATIONAL SUMMIT ON THE RIGHTS OF THE CHILD IN EDUCATION AND PRE-SUMMIT CONFERENCE OF CHILDREN AND LEARNERS

Location/Online Platform: Google	e Meet/Zoom/Teams
Date and Time:	
representatives to make recordings of m which I appear in at the event and location	he <b>Department of Education</b> ( <b>DepEd</b> ) and its my voice and to take photographs and/or videos in stated above, to be used for the communications partment be it in print, broadcast and/or electronic
I have read and understood the a	accompanying letter and information leaflet. For
things I don't understand, I will ask my	y Parent/Guardian to clarify the objective of the
activity for me.	
	activity and the part I will be involved in. I know
	at allowed to use the information about me in any
form that might harm my rights and wel	u-being.
Name	
Signature	Age

# PART B: TO BE COMPLETED BY THE PARENT/GUARDIAN

As the parent/guardian of, I hereby allow him/her to participate in the following activity:
Production Name/ Project Title: THIRD NATIONAL SUMMIT ON THE RIGHTS OF THE CHILD IN EDUCATION AND PRE-SUMMIT CONFERENCE OF CHILDREN AND LEARNERS
Location/Online Platform: Google Meet/Zoom/Teams
Date and Time:
I acknowledge that the DepEd will own all rights to his/her images and recordings made during the activity. DepEd and its representatives will have the right to use, display, exhibit, reproduce, distribute and create derivative works of these images and recordings in any media now known or later developed.
As the parent/guardian, I understand my roles and responsibility to explain what this consent form is about to the child and ensure that his/her privacy and identity rights are protected and acknowledged accordingly.
As the parent/guardian, I hereby waive any right to inspect or approve the use of the images or recordings or of any written derivatives. I further waive all moral rights. I also waive any right to royalties or other compensation arising from or related to the use of the materials.
As the parent/guardian, I hereby release, defend, indemnify and hold harmless the DepEd and its representatives from and against any claims, damages or liability arising from or related to the use of the images, recordings or materials including, but not limited to, claims of defamation, invasion of privacy, rights of publicity, copyright infringement, any misuse, distortion, blurring, alteration, optical illusion or use in composite form that may occur or may be produced in taking, processing, reducing or producing the finished product, its publication or distribution.
I, (NAME OF PARENT/GUARDIAN)
have legal authority to enter into this contract. I have read this document before signing below and I fully understand the contents, meaning and impact of this consent, waiver, indemnity and release.
This consent, waiver, indemnity and release is binding on me, my heirs, executors, administrators and assigns.
Parent/Guardian Name:
Parent/Guardian Signature:
Date:
Address:
Home Phone: Mobile Phone: