



Republika ng Pilipinas
Kagawaran ng Edukasyon
REHIYON V - BICOL

TANGGAPANG PANSANGAY NG CATANDUANES

12 November 2024

DIVISION MEMORANDUM
No. 193 s. 2024

**DISSEMINATION OF THE REGIONAL MEMORANDUM NO. 01356 S. 2024
CONDUCT OF THE 2024 ACCREDITATION AND EQUIVALENCY (A & E) TEST
REGISTRATION**

To : Assistant Schools Division Superintendent
Chiefs, CID and SGOD
Public Schools District Supervisor/In-Charge of the District
Elementary and Secondary School Heads
ALS Teachers
All Concerned

1. In reference to Regional Memorandum No. 01356 s. 2024 dated November 5, 2024 re: *Conduct of the 2024 Accreditation & Equivalency (A & E) Test Registration* which announces the registration period for the administration of the 2024 Accreditation and Equivalency (A & E) Test on October 21-December 2, 2024.

2. The following are the Testing Personnel for the A & E Test Registration

ZONE	TESTING CENTER	REGISTRATION TESTING OFFICER	CO-REGISTRAR	SUPPORT STAFF
1	Virac Central ES	Hermes T. Magtagñob	Charisse T. Dela Rosa	Rose Ann Tolentino
2	Bato Central ES	Marilou T. Sarmiento	Beverly A. Temena	Teodoro C. Boarao, Jr.
3	Viga Central ES	Dominic G. Olonan	Margie M. Valatero	Jonalyn T. Rodulfo
4	Pandan Central ES	Richard E. Japson	Rosalie Araojo	Cristine Bernardino

3. An online orientation of all concerned will be conducted on **November 14, 2024, 2:00 - 5:00 pm via Google Meet** to be sent to group chats and DepEd email address of the participants.

4. Enclosed is the Regional Memorandum No. 01356, s. 2024 for reference.

5. For inquiries, please contact **Amelia B. Cabrera**, Division ALS Focal Person or **Maria Rita SR. Tablate**, Education Program Specialist II-ALS.

6. Immediate dissemination, guidance and compliance.

By Authority of the OIC Schools Division Superintendent:

EVA S. TOLENTINO
Administrative Officer V
Officer-In-Charge



San Roque, Virac, Catanduanes
052-8114063
catanduanes@deped.gov.ph
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Republic of the Philippines
Department of Education
REGION V - BICOL



5 November 2024

REGIONAL MEMORANDUM
No. 01356 s. 2024

**CONDUCT OF THE 2024 ACCREDITATION AND EQUIVALENCY (A&E)
TEST REGISTRATION**

To : Schools Division Superintendents
CLMD and CID Chiefs
Regional and Division Testing Coordinators
Regional and Division ALS Focal Persons

1. The Department of Education (DepEd), through the Bureau of Education Assessment (BEA) in coordination with the Bureau of Alternative Education (BAE) announces the registration period for the administration of the 2024 Accreditation and Equivalency (A&E) Test.
2. The field is advised to follow the test registration guidelines per BEA Advisory Dated October 18, 2024:

A. Registration Period

1. The registration period relative to A&E Test Administration shall be on October 21 – December 2, 2024.
2. A&E Test applicants shall register in the identified Schools Division Offices (SDOs) and designated as registration centers by the Schools Division Superintendents (SDS).

B. Eligibility of Test Registrants and Requirements

3. The following are eligible to register and take the A&E Test:
 - a. ALS learners enrolled in the Learner Information System (LIS) for SY 2024-2025 on or before October 31, 2024;
 - b. Previous ALS Program Completers not registered in the LIS of the current school year who did not submit or did not meet the minimum required points in the **Presentation Portfolio Assessments (PPA)** BUT underwent additional learning intervention in the ALS K to 12 Basic Education Curriculum (BEC) certified by the ALS Implementor/Learning Facilitators (See Certification of Additional Intervention);
 - c. Previous ALS Program Completers not registered in the LIS of the current school year who did not pass the **previous A&E Test** BUT underwent additional learning intervention in the ALS k to 12 Basic



Address: Regional Center Site, Rawis, Legazpi City, 4500
Telephone Nos.: 0969 516 9555
Email Address: region5@depd.gov.ph
Website: <https://region5.deped.gov.ph/>



Education Curriculum (BEC) certified by the ALS Teacher/Community ALS Implementor/ Learning Facilitator (Enclosure A. Certification of Additional Intervention);

- d.** Applicants shall be at least 12 years old for the A&E Elementary Level and at least 16 years old for the A&E Junior High School Level **on or before the examination day.**
4. The test registrants must submit the following requirements to the Division Testing Coordinator (DTC) or to the designated Registration Testing Officer;
- a. Original and photocopy of Birth Certificate issued by the Philippine Statistics Authority (PSA) formerly National Statistics Office (NSO);
- b. If the copy of the Birth Certificate from the PSA/NSO is not available, any of the following documents can be presented:
- i. Baptismal Certificate;
 - ii. Voter's ID (with picture, signature, and date of birth);
 - iii. Valid Passport;
 - iv. Valid Driver's License; and
 - v. Any legal document bearing the applicant's picture, name, signature, and date of birth (e.g. NBI Clearance, Police Clearance)
- c. 1x1 identical ID Photo (white background with name tag)
- d. Certification of Portfolio certified by the ALS Teacher/Community ALS Implementor/Learning Facilitator and endorsed by the Division ALS Focal Person/Education Program Specialist II for ALS (EPSA) (Enclosure B. Certification of Portfolio).
5. Only the registered applicants with complete requirements shall be allowed to take the A&E Test at the testing centers approved by BEA. **No walk-in** A&E Test takers shall be accommodated.


C. Selection of Testing Personnel for the Test Administration

6. The SDS, through the Division Testing Coordinator (DTC), shall assign personnel who shall perform the functions listed below. They shall have a Very Satisfactory (VS) performance in the conduct of BEA testing program and should have no records of violations relating to national examinations policies.

During Registration

- Registration Testing Officer (RTO), co-registrar, and support staff who will manage the registration process and evaluation of applicants' documents

During the Test Administration

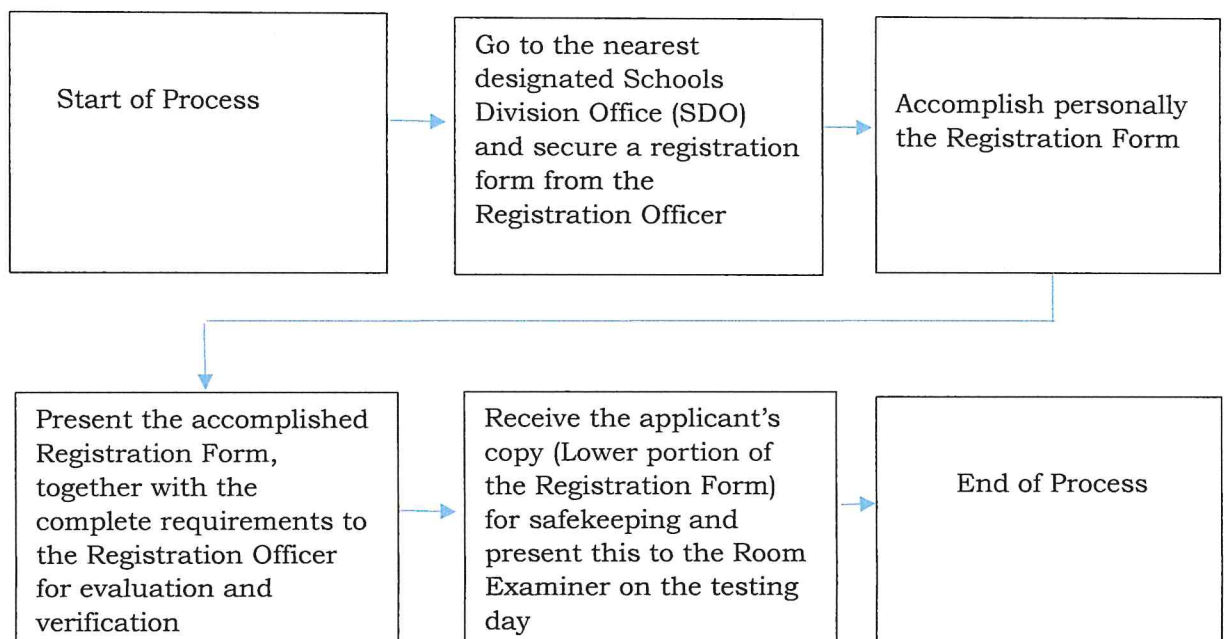
- Chief Examiners
 - Supervising examiners
 - Room Examiners
- 

- Room Examiners

Elementary	<p>RE must meet the following requirements:</p> <ul style="list-style-type: none"> *must be external from the school; *if not possible, she/he must not be a teacher of the taker ; *must be an ALS teacher teaching in elementary; *must have experienced administering any national/international assessment; and *must be credible and trustworthy as this assessment requires utmost confidentiality.
High School	<p>RE must meet the following requirements:</p> <ul style="list-style-type: none"> *must be external from the school; *if not possible, she/he must not be a teacher of the taker ; *must be an ALS teacher teaching in high school; *must have experienced administering any national/international assessment; and *must be credible and trustworthy as this assessment requires utmost confidentiality.

D. Registration Process

7. The following are the steps in the Registration Process:



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them I the registration. They shall secure the accomplished forms and the required documents for submission to the Registration Committee in the SDO.

9. After the evaluation of documents, they shall keep the applicants' copy to be given to the examinees a day before or on the testing day. This is to avoid misplacement of applicant's copy, which is needed to present on the testing day. Non-DepEd ALS Program Providers may also adapt this procedure to facilitate the registration of their learners.
10. **NO PAYMENT SHALL BE COLLECTED** by anyone involved in the A&E Test Registration, Administration, and issuance of certificate of rating.

E. Dissemination of Registration Process

11. Registration Testing Officer (RTO), co-registrar staff, and support staff shall who will manage the registration process and evaluation of applicants' documents shall disseminate the registration process to the registrants.
12. All DTCs shall orient the RTOs and ALS Implementers on the registration process and evaluation of applicants' documents. All RTOs are liable to any irregularities on the required age and documents of test applicants.
13. ALS Implementers shall help in the dissemination of information and distribution of registration form.

F. Testing Center

14. The DTCs shall prepare the list of testing centers and the total number of examinees per level. A copy of this report in MS Excel format shall be submitted to BEA through email address: bea.ead@deped.gov.ph by the DTC on or before December 6, 2024. List of testing centers will be released in a separate memo.
 15. Should there be any changes in the testing centers and total number of examines per level, an official correspondence shall be sent to this Office through the Regional Testing Coordinator (RTC), EPS Sheila C. Bulawan through email address sheila.bulawan@deped.gov.ph.
3. For information and guidance.


GILBERT T. SADSAD
Regional Director

Certification of Portfolio



Republic of the Philippines
Department of Education
REGION _____
SCHOOLS DIVISION OF _____



CERTIFICATION

This is to certify that _____ with
(Given Name, Middle Name, Last Name, Extension Name)
LRN _____ of _____ is registered as
(CLC Name)
a/an _____ in the Learners Information System (LIS) of SY
Elementary or Junior High School
_____ and has submitted a portfolio containing the following documents:

- a. Personal Information Sheet (PIS)
- b. Functional Literacy Test (FLT)
- c. Assessment Forms 1-2
- d. Recognition of Prior Learning (RPL) Forms 1-4
- e. At least four (4) work samples per Learning Strand (each highlighting the specific competency demonstrated)

This certification is issued as one of the requirements for the registration in the 2024 Accreditation and Equivalency Test.

Certified by:

ALS Teacher/Community ALS Implementor/Learning Facilitator
Signature over Printed Name
Date: _____

Endorsed by:

**Division ALS Focal Person/
Education Program Specialist II for ALS**
Signature over Printed Name
Date: _____

A&E Registration Form

A&E Form 1	<i>Copy for Registration Officer</i>
1x1 ID Photo with Name Tag	Republic of the Philippines Department of Education BUREAU OF EDUCATION ASSESSMENT 2nd Flr., Bonifacio Bldg., Meralco Ave., Pasig City 1600
ACCREDITATION AND EQUIVALENCY (A&E) TEST Registration Form	

Write Legibly. Put X on the applicable items.

Last Name		Registration Date	First Name		M.I.
Birthdate		Learner Reference Number		Civil Status	
Month	Day	Year	Single		MARRIED
Home Address		Separated		Sex	
				Male	
				Female	
Region	Division	Learning Center			
ALS Program Completed (FIs, Specify)			A&E Test Applying for		Elementary Level
					Junior High School
Proof of Identity		To be accomplished by the Registration Officer			
Contact Number		Name and Address of Testing Center			
I certify that I validated the information supplied by the applicant in this form based on the required attachments.			I certify that all information in this form are TRUE and CORRECT.		
Registration Officer's Signature Over Printed Name			Applicant's Signature Over Printed Name		
Required Attachments		<input type="checkbox"/> Proof of Identity <input type="checkbox"/> ALS Program Certification (if any)		<input type="checkbox"/> Portfolio Rating Certification <input type="checkbox"/> Proof of Birth (NSO, Passport, Any legal Documents)	

A&E Form 1	<i>Applicant's Copy</i>
1x1 ID Photo with Name Tag	Republic of the Philippines Department of Education BUREAU OF EDUCATION ASSESSMENT 2nd Flr., Bonifacio Bldg., Meralco Ave., Pasig City 1600
ACCREDITATION AND EQUIVALENCY (A&E) TEST Registration Form	
Write Legibly. Put X on the applicable items.	
Last Name	
Registration Date	
First Name	
M.I.	
Birthdate	
Learner Reference Number	
Civil Status	
Single	
MARRIED	
Separated	
Sex	
Male	
Female	
Home Address	
Region	
Division	
Learning Center	
ALS Program Completed (FIs, Specify)	
A&E Test Applying for	
Elementary Level	
Junior High School	
Proof of Identity	
To be accomplished by the Registration Officer	
Contact Number	
Name and Address of Testing Center	
I certify that I validated the information supplied by the applicant in this form based on the required attachments.	
I certify that all information in this form are TRUE and CORRECT.	
Registration Officer's Signature Over Printed Name	
Applicant's Signature Over Printed Name	
Required Attachments	
<input type="checkbox"/> Proof of Identity <input type="checkbox"/> ALS Program Certification (if any)	
<input type="checkbox"/> Portfolio Rating Certification <input type="checkbox"/> Proof of Birth (NSO, Passport, Any legal Documents)	

Certification of Additional Intervention



Republic of the Philippines
Department of Education
REGION _____
SCHOOLS DIVISION OF _____



CERTIFICATION

This is to certify that _____ with
(Given Name, Middle Name, Last Name, Extension Name)
LRN _____ of _____ is a/an
(CLC Name)
_____ ALS PROGRAM COMPLETER in the Learners Information
Elementary or Junior High School
System (LIS) of SY _____.

He/She underwent additional intervention in the ALS K to 12 Basic Education Curriculum (BEC).

This certification is issued as one of the requirements for the registration in the 2024 Accreditation and Equivalency Test.

Certified by:

ALS Teacher/Community ALS Implementor/Learning Facilitator

Signature over Printed Name

Date: _____

List of Registrants



Republic of the Philippines
Department of Education
 Region _____
 Division of _____



Accreditation and Equivalency (A&E) Test List of Registrants

Testing Center: _____ Address: _____
 Region & Division Code: _____ A&E Test Level: _____

Summary of Registrants	
Male	
Female	
Total	

No.	Name	Age	Birthdate (mm/dd/year)	Sex (M/F)	Documents Submitted (Check the appropriate Column)			
					Birth Certificate	Proof of Birthdate	Certificate of Portfolio	Certificate of Additional Intervention
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								

Prepared by:

 Signature Over Printed Name

Approved by:

 Signature Over Printed Name