



Republic of the Philippines  
Department of Education  
Region V (Bicol)  
**DIVISION OF CATANDUANES**  
Virac, Catanduanes



RELEASED

DepEd, Division of Catanduanes

RECORDS SECTION

Date OCT 25 2018

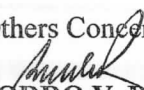
Time: 9:23 A.M.

Initial/Signature: JM

MEMORANDUM

To : Public Schools District Supervisors  
School Heads and School DRRM Coordinators of the selected Schools:  
Bagamanoc Rural Development High School  
Buyo Integrated School  
Caramoran Rural development High School  
Leandro I. Verceles Sr. National High School  
Manambrag National High School  
Mayngaway National High School  
Palta National High School  
Pandan School of Arts and Trades  
Tubli National High School  
Viga Rural Development High School

All Others Concerned

From :   
**SOCORRO V. DELA ROSA, CESO VI**  
Schools Division Superintendent

Subject : **Disaster Preparedness Training for Youth and Student Leaders**

Date : October 15, 2018

1. The Provincial Disaster Risk reduction and Management Office of Catanduanes will be conducting a **Disaster Preparedness Training for Youth and Student Leaders** on November 5-9, 2018 at Twin Rock Beach Resort, Virac as part of the province' disaster preparedness capability building program.
2. Relative to this, Schools mentioned above are encourage to send three (3) Senior High School student leaders to the said training. Registration Form attached shall be submitted to Ms. Maria Audrea L. Vivo, PDO II (DRRM) at the DRRM Unit - SGOD Office not later than October 26, 2018.
3. Registration, accommodation and meals shall be shouldered by the Provincial DRRMO while transportation and other allowable expenses shall be charged against School MOOE subject to usual auditing rules and regulations.
4. For immediate and wide dissemination.

# REGISTRATION FORM



Republic of the Philippines  
Province of Catanduanes  
Provincial Disaster Risk Reduction & Management Office  
Virac, Catanduanes



2x2 picture

Venue: Twin Rock Beach Resort, Igang, Virac, Catanduanes

Date: November 5-9, 2018

Training to be Taken: Disaster Preparedness Training for Y/S Leaders Batch 3

Name: \_\_\_\_\_

(Last Name)

(First Name)

(M.I)

(Nickname)

Date of Birth: \_\_\_\_\_ Place of Birth \_\_\_\_\_ Sex: male female Religion: \_\_\_\_\_

(Month) (Day) (Year)

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Civil Status: \_\_\_\_\_ Occupation: \_\_\_\_\_ Contact No. \_\_\_\_\_

Home Address: \_\_\_\_\_

Person to be contacted in case of emergency: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Contact No. \_\_\_\_\_

## MEDICAL CERTIFICATE

This is to certify that \_\_\_\_\_ is physically and mentally fit and:

1. Can lift weight more than his/her weight
2. Has no heart and respiratory problems
3. Can stand activities that require excessive body movements
4. Not on the "family way" (female only) and;
5. Has no contagious disease

\_\_\_\_\_  
Date

\_\_\_\_\_  
Physician Signature over printed name

## WAIVER

I hereby certify that I shall not hold the *Provincial Disaster Risk Reduction & Management Office*, its staff representative and/or instructor's liable for any and all untoward incidents (losses, damage, injuries, and death) that may result during my attendance in any or all the courses conducted by PDRRMO especially during the \_\_\_\_\_ Training.

Waiver: \_\_\_\_\_  
(Signature over printed name)

Parent/Guardian: \_\_\_\_\_  
(Signature over printed name)