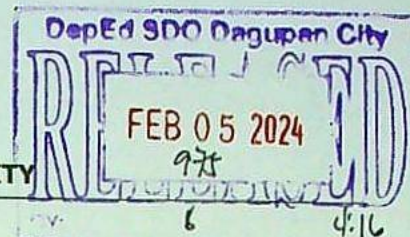




Republic of the Philippines
Department of Education
REGION I
SCHOOLS DIVISION OFFICE DAGUPAN CITY



Office of the Schools Division Superintendent
DIVISION MEMORANDUM No. 53, s. 2024

To: Assistant Schools Division Superintendent
Chief Education Supervisors CID & SGOD)
Public Schools District Supervisors
Public and Private Elementary and Secondary School Heads
School Testing Coordinators (STC)
All Others Concerned

From: Office of the Schools Division Superintendent

Subject: **REGISTRATION FOR THE 2023 REGULAR PHILIPPINE EDUCATIONAL PLACEMENT TEST (PEPT)**

Date: February 01, 2024

1. Pursuant to DepEd Advisory dated January 22, 2024, the Bureau of Education Assessment (BEA) announces the Administration of the 2023 Regular PEPT. The date of the test administration will be announced in a separate memorandum.
2. Registration of applicants for the regular examination is **now open**. For any inquiries/ concern you may contact Mr. Isagani D. Rosario, Division Testing Coordinator (DTC) in the Schools Division Office (SDO), Dagupan City.
3. The target registrants for PEPT are the following:
 - a. Learners from schools without a government permit
 - b. Learners from nonformal and informal education programs
 - c. Learners who have incomplete or no record of formal schooling
 - d. Learners with back subjects
 - e. Learners who need grade-level standards assessment
 - f. Learners who are overage for their grade levels
4. No test registration fees shall be collected from the test registrants.
5. The placement of the PEPT qualifiers for this regular test administration shall take effect in the current school year when the test is administered pursuant to Section 6 (Grade Level Placement Assessment) 2.b. of DepEd Order No. 55, s. 2016 titled Policy Guidelines on the National Assessment of Student Learning for the K to 12 Basic Education Program.
6. Attached is the regular PEPT Registration Form. Registrants shall submit the documentary requirements to Mr. Isagani D. Rosario at the SGOD Office. **Deadline of submission** is not later than **February 08, 2024**. Below are the requirements for specific types of test registrants.



Address: Burgos St., Poblacion Oeste, Dagupan City
Telephone: (075) 653-4101
Website: depeddagupan.com
email: dagupan.city@deped.gov.ph



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Office of the Schools Division Superintendent

a. For new test-takers

- i. Original and one photocopy of the **birth certificate** duly authenticated and issued by the Philippine Statistics Authority (formerly National Statistics Office) or by the Local Civil Registrar
- ii. Original and one photocopy of the permanent school record (e.g., SF 10/Form 137) signed by the school principal/ registrar/ school administrator)
- iii. Certificate of attendance in intervention programs, or any proof of schooling (if applicable)
- iv. Two identical and recently taken 1 x 1 colored ID pictures with name tags.
- v. One copy of the accomplished PEPT Registration Form

b. For test retakers

- i. Original and one photocopy of the **PEPT Certificate of Rating** (for applicants who need to retake a PEPT subtest)
 - ii. Two identical and recently taken 1 x 1 colored ID pictures with name tags
 - iii. One copy of the accomplished PEPT Registration Form
7. The School Testing Coordinators (STC) shall be in charge of the school-based evaluation of documents and shall ensure that the documentary requirements of each registrant are complete before submission at the SDO.
8. For information, guidance and compliance of all concerned.

DR. ROWENA C. BANZON, CESO V
Schools Division Superintendent



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REGULAR 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)
		<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Yes <input type="checkbox"/> No
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	
	<small>To be filled out by the Division Testing Coordinator</small>	<small>To be filled out by the Division Testing Coordinator</small>	
Place and Date of Registration	Examination Center		
<div style="border: 1px solid black; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center; margin: 0 auto;"> 1" x 1" Picture </div>	INSTRUCTIONS TO THE PEPT TESTING COORDINATOR		
	<ol style="list-style-type: none"> 1. 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. 2. Detach Registrant's Copy and give it to the applicant. 3. To verify the identification of the registrant, keep the LEM's Copy and give it to the Chief Examiner on the examination day. 4. NO REGISTRATION FEE 		
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.			
2023 _____ Signature over Printed Name of Registrant/Examinee	<small>To be filled out by the Division Testing Coordinator</small> CHECK DOCUMENTS SUBMITTED		
For NEW PEPT REGISTRANTS			
<input type="checkbox"/> Birth Certificate (NSO/PSA or Local Civil Registrar)			
<input type="checkbox"/> School Records (SF10/F137 signed by the School Principal/Registrar/Administrator)			
<input type="checkbox"/> Identical and recently taken 1x1 colored ID pictures with name tag (2pcs.)			
For retakers and PEPT passers only			
<input type="checkbox"/> Certificate of Rating (COR)			
<input type="checkbox"/> Identical and recently taken 1x1 colored ID pictures with name tag (2pcs.)			
Additional requirements for PEPT Validation purposes only			
<input type="checkbox"/> Endorsement Letters			
<input type="checkbox"/> School Division Office			
<input type="checkbox"/> Regional Office			



REGULAR 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)
		<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Yes <input type="checkbox"/> No
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	
	<small>To be filled out by the Division Testing Coordinator</small>	<small>To be filled out by the Division Testing Coordinator</small>	
Place and Date of Registration	Examination Center		
<div style="border: 1px solid black; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center; margin: 0 auto;"> 1" x 1" Picture </div>	NOTES:		
	<ol style="list-style-type: none"> 1. Upon registration, the Registration Officer will inform you of the examination date and venue. 2. Complete all the information in the Registration Form. 3. 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. 		
Certified True and Correct: _____ DIVISION TESTING COORDINATOR Signature Over Printed Name			
2023			