Regional Memorandum

SUBMISSION OF NOMINEES TO SEAMEO QITEP SCHOLARSHIP PROGRAM ON STEM EDUCATION FOR MATHEMATICS LEARNING FOR PRIMARY SCHOOL TEACHERS

To Schools Division Superintendents

1. In reference to DepEd Memorandum C1-2020-00012 on SEAMEO QITEP Scholarship Program, this Office, through the Human Resource Development Division would like to inform the Schools Division Offices that SEAMEO made some adjustments to the conduct of its Regular Course on STEM Education for Mathematics Learning for Primary School Teachers as follows.

<table>
<thead>
<tr>
<th>No.</th>
<th>Matter</th>
<th>Before Adjustment</th>
<th>After Adjustment</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Mode</td>
<td>Offline (face-to-face)</td>
<td>Online (via Zoom and Moodle)</td>
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<td>2.</td>
<td>Tentative Date</td>
<td>9 – 22 October 2020</td>
<td>9 – 27 October 2020</td>
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2. For your information, Regular Course on STEM Education for Mathematics Learning for Primary School Teachers is free of charge and after completing the course the participants will be awarded a Certificate of Participation (in accordance with the rules and conditions applied by the Centre).

3. As the course is about to start in October each Schools Division Office is requested to submit the name and documents of (1) one qualified nominee for the scholarships via email at hrd.calabarzon@deped.gov.ph on or before September 17, 2020 at 4:00 pm.

4. Please be informed that the Regular Course on STEM Education for Mathematics Learning for Primary School Teachers is to be conducted virtually via online platforms.

"EXCELLENCE is a CULTURE and QUALITY is a COMMITMENT"

Trunkline: 02-8682-5773/8684-4914/8647-7467
Website: depedcalabarzon.ph
Document Inquiry: https://r4a-teadoc.com/inquire
Facebook: DepEd R-4A Calabarzon
5. Please refer to the attached list of requirements for the said scholarship. Nominees are also requested to fill out the screening form attached. A notice/letter will be sent through email for those who will qualify for interview.

6. Immediate dissemination of this Memorandum is desired.

WILFREDO E. CABRAL
Regional Director

hrd/criz
Screening Form

COURSE TITLE: ____________________________________________________________

Application of (NAME of NOMINEE): ________________________________________

Region: ____________________________
Submitted on (DATE and TIME): ______________________

1. Email Addresses

2. Training Course

3. Contact Numbers

4. Designation/Position

5. Work Station (School/Office Unit):

6. School Division Office:

7. Religion:

8. Age:

9. Number of Years in DepEd:

10. Work Experience/s Related to Teaching (Indicate the highlights and duration.)

11. Outstanding Accomplishments (Max of 5)

12. Educational Attainment (Indicate School, Program, Specialization, and Title of Thesis/Dissertation, if any.)

13. What challenges had you experienced as a teacher? What did you learn from them?

14. What initiatives do you plan to implement so your school/office will benefit from this program?

15. How did you hear about this scholarship opportunity?