

Republic of the Philippines
Department of Education
REGION IV-A CALABARZON



08 October 2024

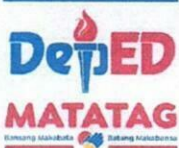
Regional Memorandum
No. 730, s. 2024

**CONDUCT OF THE REGIONWIDE CELEBRATION OF
THE 2024 NATIONAL CHILDREN'S MONTH
"Break the Prevalence, End the Violence:
Protecting Children, Creating
a Safe Philippines"**

To **Schools Division Superintendents**

1. In reference to DepEd Memorandum No. OUOPS 2024-05-02667¹, this Office through the Field Technical Assistance Division, initiates the conduct of the aforementioned subject on **November 12, 2024, 8:00 am** at the **Bulwagan ng Karangalan, DepEd Region IV-A CALABARZON**
2. This activity aims to empower, strengthen, and enhance the protection of learners against violence and other learner protection incidents, and to inform duty-bearers of their responsibility of ensuring a safe and positive learning environment.
3. The participants in this activity are the Division permanent and alternate learner rights and protection focal personnel, Regional Federated Supreme Secondary Learner Government Executive Officers and their respective advisers.
4. See attached consent forms for the learner-participants that need to be accomplished and submitted to the Secretariat on the day of the activity. Moreover, all participants must accomplish the pre-registration link through <https://forms.gle/BmV3EfvWWYqpCUyY6> on or before **October 31, 2024**.
5. Relative to this, the Regional Technical Working Group on Learner Rights and Protection will be having a preparatory meeting on **October 31, 2024, 2:00 pm at FTAD Conference Area**.
6. Food will be provided by the Learner Rights and Protection Office Region IV-A CALABARZON. While the travel expenses of the participants shall be

¹ Guidelines on the release, use, reporting, monitoring, and evaluation of program support funds (PSF) intended for learner rights and protection program-batch 1



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Telephone No.: 02-8682-2114
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Certificate No. PHP QMS
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charged against their local funds, subject to the usual accounting and auditing rules and regulations of the Department.

7. For clarifications, kindly contact Michael Girard R. Alba Chief, Field Technical Assistance Division at michael.alba@deped.gov.ph or Rochelle May M. Nisola, Learner Rights and Protection Focal Person at 09206970355 or rochellemay.nisola@deped.gov.ph.
8. Immediate dissemination and strict compliance with this Memorandum is desired.


ATTY. ALBERTO T. ESCOBARTE, CESO II
Regional Director 

ROF/RMMN

Enclosure A: Program of Activities

CONDUCT OF THE REGIONWIDE CELEBRATION OF

2024 NATIONAL CHILDREN'S MONTH:

"Break the Prevalence, End the Violence: Protecting Children, Creating a Safe Philippines"

November 12, 2024

TIME	ACTIVITY	PERSONS RESPONSIBLE
7:00 am – 8:30 am	Arrival and Registration of the Participants	Regional Technical Working Group on Learner Rights and Protection
8:30 am – 9:00 am	Preliminaries <ul style="list-style-type: none"> • Philippine National Anthem • Opening Prayer • Quality Policy Statement • Bagong Pilipinas Hymn • Calabarzon March 	Audio-Visual Presentation
9:00 am – 9:10 am	Welcome Remarks	Michael Girard R. Alba <i>Chief, FTAD</i>
9:10 am – 9:20 am	Inspirational Message	Loida N. Nidea <i>Assistant Regional Director</i>
9:20 am – 9:30 am	Inspirational Message	Atty. Alberto T. Escobarte, CESO II <i>Regional Director</i>
9:30 am -10:00 am	Leadership training on parliamentary procedures	Michael Girard R. Alba <i>Chief, FTAD</i>
10:00 am – 10:30 am	Mental Health on Learner Rights and Protection	
10:30 am– 11:30 am	4 R's on Child Protection	Atty. Marianne A. Dilag, CPA Attorney III, Office of the Regional Director
11:30 – 12:00 nn	Sharing of best practices of the Schools Division Office on their Implementation of Learner Rights and Protection Program	
12:00 nn – 1:00 pm	LUNCH BREAK	
1:00 pm – 1:30 pm	Significant Events of Learner Rights and Protection Program in the Regional Level	Michael Girard R. Alba <i>Chief, FTAD</i>
1:30 pm – 2:00 pm	Closing Ceremony -Signing of Pledge of Commitment - Awarding of Certificates	Regional Technical Working Group on Learner Rights and Protection
2:00 pm onwards	TRAVEL TIME	



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LEARNER CONSENT, WAIVER, INDEMNITY and RELEASE

(To be completed by the Learner)

I, _____, agreed to participate with the consent of my parents and/or legal guardian in the Regional Federated SELG and SSLG Election for SY 2024-2025 at BP International Training Center, Mt. Makiling, Los Baños, Laguna.

I agree to give permission to the **Department of Education (DepEd)** and its representatives to make recordings of my voice and to take photographs and/or videos in which I appear in at the event and location stated above, to be used for the communications and various public campaigns of the Department be it in print, broadcast and/or electronic media.

I have read and understood the accompanying letter and information leaflet. For things I do not understand, I will ask my Parent/Guardian to clarify the objective of the activity for me.

I know the purpose of the project/activity and the part I will be involved in. I know that DepEd and its representative are not allowed to use the information about me in any form that might harm my rights and well-being.

Name of Learner	Name of School
Age	Date



Address: Provincial Sports Complex, Bolbok, 4200 Batangas City

Telephone: (043) 722-1840 / 722-1796

Email Address: deped.batangas@deped.gov.ph

Website: www.depedbatangas.com



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Name of Child/ren	Date

** Please submit this form to your child's school prior to participation in the event.*



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with my household members, will follow the required health and safety protocols and procedures adopted by the school and community.

Documentation

I confirm that I give full permission in any recording or picture taken of my child during the conduct of this event and to use some or all my child's images/ contribution/ performance in any publication (including electronic publications such as film or website) created by or for the DepEd-Regional Office CALABARZON and to release this material to DepEd official platforms.

Confidentiality

I am aware that any information that will be given during the activity will be kept strictly confidential, and personal information will be treated in accordance with the Republic Act 10173, Data Privacy Act of 2012. I am assured that the information about my child will not be shared outside of the implementation team. My child's name will not be used when data from this activity is analyzed.

I hereby confirm that I agree and understand the commitment of my child as a participant. I also understand and will support my child's endeavor to meet the expectations, guidelines, and responsibilities to his/her fellow participants and to DepEd.

To the extent allowed by law and rules, I hereby agree to waive, release, and discharge any and all claims, causes of action, damages, and rights against the school/division and its personnel as well as officials and personnel of the Department of Education relative to the conduct of the activity.

With full understanding, I – on behalf of myself, my household members, and my child/ren – hereby freely and voluntarily give my consent to my child's participation in the activity to be held on July 1, 2024. I also attest that I had sought the views of my child and he/she has expressed a willingness to participate in the activity.

CONTACT DETAILS FOR QUESTIONS OR PROBLEMS

For any concerns or clarification, you may contact the Division Youth Formation Coordinator through the email address _____.

Signature of Parent/Guardian over Printed Name	Contact Details (Mobile Number)
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PARENTAL CONSENT AND WAIVER FORM

I, _____, as the parent or legal guardian of _____, hereby acknowledge that I have been informed of the details of the conduct of the **CELEBRATION OF THE 2024 NATIONAL CHILDREN'S MONTH** that will be held on **November 12, 2024** at **Bulwagan ng Karangalan, DepEd Region IV-A CALABARZON**.

I understand that the Regional Office-CALABARZON of the Department of Education (DepEd) shall implement the minimum public health standards set by the government to minimize the risk of the spread of any communicable disease, but it cannot guarantee that my child will not become infected.

I understand that my child's in-person attendance at the event will include associating with teachers, fellow learners and school personnel, and other persons inside and outside of the school that may put my child at risk of transmission of any communicable disease, notwithstanding the precautions undertaken by the implementing team.

Voluntary Participation

I acknowledge that my child's participation in this activity is completely voluntary. My child may decline to participate or withdraw from participation at any time for any reason. Declining or withdrawing participation will not result in any penalty or loss of benefits or reduction of any basic right to which my child is entitled. While there remains the risk of possible transmission of any communicable disease to my child/ren, and to the members of my household, I freely assume the said risk and I permit my child/ren to attend this activity.

Exclusion (Limitations/Ineligibility)

I am aware that symptoms of any communicable disease include, but are not limited to, fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, the new loss of taste or smell, sore throat, congestion or runny nose, nausea, vomiting, and diarrhea.

I confirm that my child currently has none of those symptoms and is in good health. I will not allow my child to physically go to the event if my child or any member of my household develops any of the said symptoms or any other symptoms of illness that may or may not be related to any communicable disease. I will also inform the school/division and not allow my child to attend the event if my child or any of my household members test positive for any communicable disease. My child/ren and I,



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