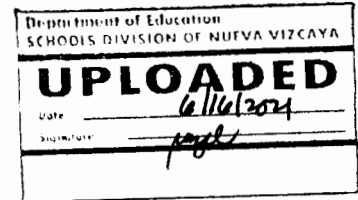




Republic of the Philippines  
**Department of Education**  
 REGION II – CAGAYAN VALLEY  
 SCHOOLS DIVISION OF NUEVA VIZCAYA



15 June 2021

DIVISION MEMORANDUM  
 No. **199**, s. 2021

**PRE-ASSESSMENT RESULT FOR JUNE 3, 2021 ASSESSMENT**

To: OIC-Assistant Schools Division Superintendent  
 CID and SGOD Chiefs  
 Education Program Supervisors  
 Public Schools District Supervisors/District-In-Charge  
 Administrative Officer V  
 Section and Unit Heads  
 Elementary and Secondary School Heads  
 All Others Concerned

1. This office would like to announce the herein attached Result of the First Level Evaluation of all applicants. Identification of Qualified Applicants are based on the submitted documents last June 14, 2021.
2. All Qualified Applicants are advised to submit a complete set of documents not later than **June 21, 2021**. Documents submitted after set deadline will no longer be accepted.
3. Kindly arrange documents according to the following sequence with eartabs and table of contents:

Position	Document Arrangement
Administrative Aide III (Driver I) School Principal III	A. Omnibus Sworn Statement B. Self-Assessment Form C. Performance Rating D. Experience E. Outstanding Accomplishments <ul style="list-style-type: none"> <li>- Outstanding Employee Award</li> <li>- Innovation</li> <li>- Research and Development</li> <li>- Publication/Authorship</li> <li>- Consultancy/Speakership in Training Attended</li> </ul> F. Education G. Training

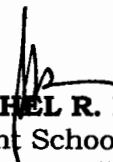


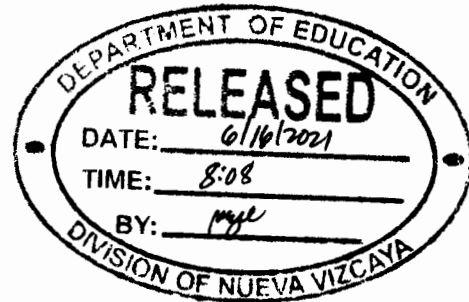
**Address:** Quezon St., Don Domingo Maddela, Bayombong, Nueva Vizcaya  
**Telephone Nos.:** (078) 362-0106, 09171589946  
**Email Address:** [nuevavizcaya@deped.gov.ph](mailto:nuevavizcaya@deped.gov.ph)  
**Website:** [www.deped-nv.com.ph](http://www.deped-nv.com.ph)

Doc Code:	<b>FM-OSDS-SDS-001</b>	Rev:	<b>01</b>
As of:	<b>01-09-2020</b>	Page:	<b>1</b>



4. Qualified applicants are also requested to fill up the appropriate **Self-Assessment Form** based on the applied position to be attached on their packaged documents. *See attached file for the Self-Assessment Form.*
5. All documents should be validated as to its authenticity, therefore, all applicants should secure an Omnibus Sworn Statement to be attached on their packaged documents
6. For the link and schedule of assessment please see attached file.
7. For information, guidance and compliance.

  
**RACHEL R. LLANA, Ph.D., CESO VI**  
 Assistant Schools Division Superintendent  
 Officer In-Charge  
 Office of the Schools Division Superintendent



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SCHOOLS DIVISION OF NUEVA VIZCAYA

**LIST OF QUALIFIED APPLICANTS**

<b>Position</b>	<b>Name</b>
<b>School Principal III</b>	JAMES, RONALDO G.
<b>Administrative Aide I (Utility)</b>	INWAY, VINIA C. MA-O, AGUSTINA L.

**LINK FOR THE ASSESSMENT**

<b>Position</b>	<b>Link</b>
<b>School Principal III</b> <b>Administrative Aide I (Utility)</b>	<a href="https://meet.google.com/uhb-gwkf-zxf">https://meet.google.com/uhb-gwkf-zxf</a>

**SCHEDULE OF ASSESSMENT**

<b>Date</b>	<b>Time</b>	<b>Position</b>	<b>Name</b>
June 23, 2021	9:00 – 12:00	School Principal III	<b>JAMES, RONALDO G.</b>
		Administrative Aide I (Utility)	<b>INWAY, VINIA C.</b> <b>MA-O, AGUSTINA L.</b>



**Address:** Quezon St., Don Domingo Maddela, Bayombong, Nueva Vizcaya  
**Telephone Nos.:** (078) 362-0106, 09171589946  
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**Website:** [www.deped-nv.com.ph](http://www.deped-nv.com.ph)





**Initial Evaluation Result**

**Qualification Standards of the Position**

Position: ADMIN. AIDE  
 SG/ Salary per Month: \_\_\_\_\_  
 Education: \_\_\_\_\_  
 Training: \_\_\_\_\_  
 Experience: \_\_\_\_\_  
 Eligibility: \_\_\_\_\_

Name of Applicant	Address	Position	School/District	Age	Sex	Civil Status	Contact No.	Education	Training				Experience			Eligibility	Performance Rating		Remarks
									Title	Hours	Role	Date	Details	Years	Months		SY	Rating	
1	INWAY, VINIA C.	BINALIAN, KAYAPA	LABORER	EMERSON NETWORK POWER	27	F	M	0975-841-9101	SECONDARY					LABORER	1 YR	11 MOS			
2	MA-O, AGUSTINA	NANSIAKAN, KAYAPA	UTILITY WORKER	NANSIAKAN NHS	44	F	M		SECONDARY-UNDER GRAD.	BGY. PEACEMAKING ACTION TEAM (BPA <sup>2</sup> )	16	PARTICIPANT	DEC. 3-4, 2020	UTILITY WORKER		4 MOS			
										OCCUPATIONAL FIRST AID AND BASIC LIFE SUPPORT	24	PARTICIPANT	SEPT. 9-11, 2019						



**Initial Evaluation Result**

**Qualification Standards of the Position**

Position: ADMIN. AIDE  
 SG/ Salary per Month: \_\_\_\_\_  
 Education: \_\_\_\_\_  
 Training: \_\_\_\_\_  
 Experience: \_\_\_\_\_  
 Eligibility: \_\_\_\_\_

Name of Applicant	Address	Position	School/District	Age	Sex	Civil Status	Contact No.	Education	Training				Experience			Eligibility	Performance Rating		Remarks
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1	INWAY, VINIA C.	BINALIAN, KAYAPA	LABORER	EMERSON NETWORK POWER	27	F	M	0975-841-9101	SECONDARY					LABORER	1 YR	11 MOS			
2	MA-O, AGUSTINA	NANSIAKAN, KAYAPA	UTILITY WORKER	NANSIAKAN NHS	44	F	M		SECONDARY-LINDER GRAD.	BGY. PEACEMAKING ACTION TEAM (BPA*)	16	PARTICIPANT	DEC. 3-4, 2020	UTILITY WORKER		4 MOS			
										OCCUPATIONAL FIRST AID AND BASIC LIFE SUPPORT	24	PARTICIPANT	SEPT. 9-11, 2019						

**NV DIVISION ASSESSMENT OF APPLICANTS FOR PROMOTION**  
**DepED Order No. 66, s. 2007- Non-Teaching Group Level I**

Reference: Division Memo No.: \_\_\_\_\_

Assessment Date: \_\_\_\_\_

For signature of the applicant before the assessment: PLEDGE OF HONESTY AND INTEGRITY

I honestly certify that the documents I submitted to the Personnel Selection Board are true copies, accurate and authentic.  
 Any fraudulent act/s that will be discovered while the assessment is going on shall disqualify me for promotion.

Name and Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**INSTRUCTIONS TO THE APPLICANT:**

It is assumed that you studied carefully DO 66, s. 2007. Based only on the documents that you submitted, assess yourself.  
 Show original documents. Put a check mark on the appropriate blanks then write your self-ratings.

**INSTRUCTIONS TO THE PSB:**

Assess the applicant based on the documents that he/she submitted. Check on authenticity of the documents through interview and and/or other means.

		Self	PSB
Name: _____ PRC License #: _____			
School: _____ Expiry Date #: _____			
District: _____			
Position Applied for: _____			
Experience: _____ Years As _____			
<b>PERFORMANCE RATING (Last 3 Rating Periods)</b> <span style="float:right;"><b>35</b> points</span>			
Period 1 _____			
Period 2 _____			
Period 3 _____			
Average: _____ Must be signed by the SDS			
<b>EXPERIENCE:</b> <span style="float:right;">5 points</span>			
_____ From _____ to _____			
_____ From _____ to _____			
_____ From _____ to _____			
Total No. of Years _____ # of Months _____ # of days _____			
<b>OUTSTANDING ACCOMPLISHMENTS</b> <span style="float:right;">5 points</span>			
a. Outstanding Employee Award <input checked="" type="checkbox"/> ( ) with evidence ( ) w/o evidence			
b. Innovations <input checked="" type="checkbox"/> ( ) with evidence ( ) w/o evidence			
c. Research & Development <input checked="" type="checkbox"/> ( ) with evidence ( ) w/o evidence			
d. Publication/Authorship <input checked="" type="checkbox"/> ( ) with evidence ( ) w/o evidence			
e. Consultancy/Speakership in _____ <input checked="" type="checkbox"/> ( ) with evidence ( ) w/o evidence			
Trainings attended _____			
<b>EDUCATION</b> <span style="float:right;">10 points</span>			
* Complete Academic Req. for Masters Degree <input checked="" type="checkbox"/> 6 pts.			
* Masters Degree <input checked="" type="checkbox"/> 7 pts.			
* Complete Academic Req. for Doctoral Degree <input checked="" type="checkbox"/> 9 pts.			
* Doctoral Degree <input checked="" type="checkbox"/> 10 pts.			
<b>TRAINING</b> <span style="float:right;">10 points</span>			
Participant in a specialized training, e.g. Scholarship Programs, Short Courses, Study Grants			
Participants in (after the last promotions)			
* 3 or more trainings with at least 3 days per training not credited during the last promotions			
<input checked="" type="checkbox"/> district - (2 pts.) <input checked="" type="checkbox"/> division - (4 pts.) <input checked="" type="checkbox"/> Regional - (6 pts.)			
* 1 or more trainings w/ at least 3 days per training not credited during the last promotions			
<input checked="" type="checkbox"/> National level - (8pts.) <input checked="" type="checkbox"/> International - (10pts.)			
* Chair/co-chair in a Technical/Planning Committee			
<input checked="" type="checkbox"/> district - (2 pts.) <input checked="" type="checkbox"/> division - (4 pts.) <input checked="" type="checkbox"/> Regional - (6 pts.)			
<input checked="" type="checkbox"/> National level - (8pts.) <input checked="" type="checkbox"/> International - (10pts.)			
<b>POTENTIAL (5 POINTS)</b> <span style="float:right;"><b>PSYCHOSOCIAL ATTRIBUTES AND PERSONALITY TRAITS 20 POINTS)</b></span>			

\_\_\_\_\_  
 Printed Name & Signature



**NV DIVISION ASSESSMENT OF APPLICANTS FOR PROMOTION  
DepED Order No.42 s. 2007- SCHOOL HEADS**

Reference: Division Memo No.: \_\_\_\_\_

Assessment Date: \_\_\_\_\_

For signature of the applicant before the assessment: PLEDGE OF HONESTY AND INTEGRITY

I honestly certify that the documents I submitted to the Personnel Selection Board are true copies, accurate and authentic. Any fraudulent act/s that will be discovered while the assessment is going on shall disqualify me for promotion.

Name and Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**INSTRUCTIONS TO THE APPLICANT:**

It is assumed that you studied carefully DO 42, s. 2007. Based only on the documents that you submitted, assess yourself. Show original documents. Put a check mark on the appropriate blanks then write your self-ratings.

**INSTRUCTIONS TO THE PSB:**

Assess the applicant based on the documents that he/she submitted. Check on authenticity of the documents through interview and and/or other means.

		Self	PSB
Name:	PRC License #:		
School:	Expiry Date #:		
District:			
Position Applied for:			
Experience: _____ Years As _____			
<b>PERFORMANCE RATING (Last 3 Rating Periods)</b>	<b>30 points</b>		
Period 1 _____			
Period 2 _____			
Period 3 _____			
Average: _____	Must be signed by the SDS		
<b>EXPERIENCE:</b>	<b>10 points</b>		
_____ From _____ to _____			
_____ From _____ to _____			
_____ From _____ to _____			
Total No. of Years      # of Months      # of days			
<b>OUTSTANDING ACCOMPLISHMENTS</b>	<b>30 points</b>		
a. Outstanding Employee Award      (5)    ( ) with evidence ( ) w/o evidence			
b. Innovations      (5)    ( ) with evidence ( ) w/o evidence			
c. Research & Development      (10)    ( ) with evidence ( ) w/o evidence			
d. Publication/Authorship      (5)    ( ) with evidence ( ) w/o evidence			
e. Consultancy/Speakership in Trainings attended      (5)    ( ) with evidence ( ) w/o evidence			
<b>EDUCATION</b>	<b>10 points</b>		
* Complete Academic Req. for Masters Degree      6 pts.			
* Masters Degree      7 pts.			
* Complete Academic Req. for Doctoral Degree      9 pts.			
* Doctoral Degree      10 pts.			
<b>TRAINING</b>	<b>10 points</b>		
Participant in a specialized training, e.g. Scholarship Programs, Short Courses, Study Grants Participants in (after the last promotions)			
* 3 or more trainings with at least 3 days per training not credited during the last promotions ( ) district - (2 pts.)      ( ) division - (4 pts.)      ( ) Regional - (6pts.)			
* 1 or more trainings w/ at least 3 days per training not credited during the last promotions ( ) National level - (8pts.)      ( ) International - (10pts.)			
* Chair/co-chair in a Technical/Planning Committee ( ) district - (2 pts.)      ( ) division - (4 pts.)      ( ) Regional - (6pts.) ( ) National level - (8pts.)      ( ) International - (10pts.)			
<b>POTENTIAL - (5 POINTS)</b>	<b>PSYCHOSOCIAL ATTRIBUTES AND PERSONALITY TRAITS - (5 POINTS)</b>		

\_\_\_\_\_  
Printed Name & Signature