



Republic of the Philippines  
**Department of Education**  
Region IV-A  
SCHOOLS DIVISION OF QUEZON PROVINCE

23 November 2020

**DIVISION MEMORANDUM**  
DM No. 370, s. 2020

**REGISTRATION AND ADMINISTRATION OF THE  
2020 PHILIPPINE EDUCATIONAL PLACEMENT TEST (PEPT)**

**To: OIC-Assistant Schools Division Superintendents, CID and SGOD Chiefs, Education Program Supervisors, Public Schools District Supervisors, Education Program Specialists, School Heads (Elementary and Secondary), District and School Testing Coordinators, and All Concerned**

1. The Department of Education (DepEd), through the **Bureau of Education Assessment (BEA)**, in coordination with the **Division Testing Committee**, announces the schedule of registration and administration of the **2020 Philippine Educational Placement Test (PEPT)**.
2. Pursuant to DepEd Order No. 30, s. 2020 entitled *Amendment to DepEd Order No. 007, s. 2020 (School Calendar and Activities for School Year 2020-2021)*, the Philippine Educational Placement Test (PEPT) shall be administered in all schools divisions nationwide on **February 7, 2021**, using a **paper-and-pencil modality**.
3. The registration period for the above-mentioned examination shall be from **November 15, 2020 to December 15, 2020**. Registration fee for this examination is **waived** due to the existing health crisis. The following learners are eligible to apply for the PEPT, to wit:
  - 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; and
  - f) Learners who are overage for their grade level.

However, in compliance with **Executive Order 112, s. 2020** and **Inter-Agency Task Force (IATF) Resolution No. 79**, applications shall only be limited to registrants who are **fifteen (15) to sixty-five (65) years old**. Learners with **immunodeficiency, comorbidity, or other health risks**, and **all pregnant women, shall not be allowed** to register for the said examination.

DEPEDQUEZON-TM-SDS-04-009-003



*"Creating Possibilities, Inspiring Innovations"*

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By: CRISTELL 4:50 PM  
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4. Due to the current situation, **Public Schools District Supervisors (PSDSs), School Heads in-charge of Testing and Assessments, and District and School Testing Coordinators** are advised to work hand-in-hand with the Division Testing Committee, and shall create a **District Registration Committee** which shall be responsible in the conduct of registration and evaluation of eligibility of test applicants and shall be guided with the following enclosures:
  - a) **Enclosure 1 – 2020 PEPT Registration Form**
  - b) **Enclosure 2 – Medical Declaration Form**
  - c) **Enclosure 3 – PEPT Registration Procedure**
  - d) **Enclosure 4 – Format of Registration Data to be submitted to BEA**
5. All PEPT applications shall be subjected to documentary evaluation by the District Testing Committee which shall be responsible for the submission of the evaluated documents to the Division Testing Committee.
6. Documentary requirements for this examination shall include the following:
  - a) **Accomplished PEPT Registration Form** (see Enclosure 1);
  - b) **Original and certified photocopy** of the School Record
    - a. **School Form 10 (SF10) or Form 137 for JHS applicants; and**
    - b. **School Form 9 (SF9) or Form 138 for Elementary level applicants.**
  - c) **Original and photocopy of Birth Certificate** issued by **PSA/NSO** (*Baptismal Certificate, Birth Certificate issued and duly signed by the Local Civil Registrar shall be accepted in the absence of a birth certificate*).
  - d) **Two (2) "1x1" ID pictures; and**
  - e) **Accomplished Medical Declaration Form.**

The District Registration Committee shall ensure the completeness and authenticity of the documentary requirements submitted by the registrants. **Registrants with incomplete and inadmissible requirements shall not be allowed to take the test.**

7. The placement of PEPT qualifiers who took the test during this test administration shall take effect in the same or current school year when the test was administered (School Year 2020-2021) thereby, temporarily suspending provisions on the Effectivity of Grade Level Placement of PEPT Qualifiers stated in Section 6-2A of DepEd Order 55, s. 2016.
8. The Districts, thru the PSDS and/or School Head in-charge of Testing are highly encouraged to conduct an advocacy campaign to support the PEPT program thru various methods including but not limited to posters or web-based bulletins, online/offline advertising, brochures/leaflets

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distribution and coordination with the Division Planning Officer to identify overage learners based on the LIS database.

9. In addition thereto, there will be a conference of all **School Heads in-charge of Testing and Assessment** and the **District Testing Coordinators** on **December 9, 2020; 1:00PM** via **online platform** which will be released on the day of the conference thru the PSDSs.
10. For more information, you may directly reach the **School Governance and Operations Division (SGOD)** at telephone numbers **(042) 784 0366** local **115** or **116** and look for the Focal Person in-charge of testing.
11. Strict compliance and widest dissemination of this Memorandum is desired.

**ELIAS A. ALICAYA, JR., EdD**  
Assistant Schools Division Superintendent  
Officer-in-charge  
Office of the Schools Division Superintendent

**Enclosure 1- 2020 PEPT Registration Form**

PEPT FORM 1

Republic of the Philippines  
Department of Education  
**BUREAU OF EDUCATION ASSESSMENT**

**FREE**

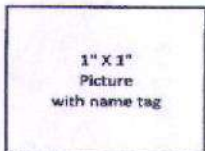
**PHILIPPINE EDUCATIONAL PLACEMENT TEST**

NO.		<b>REGISTRATION FORM</b>				LEM's Copy	
Surname		First Name				MI	
Mailing Address:	No., Street, Barrio, Town, Province/City			Contact No.	Age	Sex	
Date of Birth	LRN (if any)			Date of Examination			
Name and Address of School Last Attended				Grade Level Completed/Finished		Division Code	
Place and Date of Registration				Purpose of Examination			
Examination Center				<input type="checkbox"/> Placement <input type="checkbox"/> Validation <input type="checkbox"/> Subject Completion			

Division Testing Coordinator's Signature Over Printed Name

Applicant's Signature Over Printed Name

**INSTRUCTION TO THE PEPT DIVISION TESTING COORDINATOR**



1" X 1"  
Picture  
with name tag

FEBRUARY 2021

1. Before signing this form, please see to it that all entries especially those on Date of Birth, Age and Grade Level Finished are legible and correct.
2. Detach Applicant's Copy and give it to the applicant.
3. Keep the LEM's Copy and give it to the Chief Examiner on examination day for applicant verification purposes.
4. Verify through LIS if the school where the learner comes from has a government permit.
5. For learners from private schools without government permit, place the endorsement letter from the Regional Office inside each ETRE.

CHECK(✓) DOCUMENT/S SUBMITTED

- Birth Certificate
- School Record/s
  - Secondary - Form 137
  - Elementary - Form 137/138
- ID Pictures

PEPT FORM 1

Republic of the Philippines  
Department of Education  
**BUREAU OF EDUCATION ASSESSMENT**

**FREE**

**PHILIPPINE EDUCATIONAL PLACEMENT TEST**

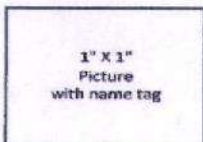
NO.		<b>REGISTRATION FORM</b>				Applicant's Copy	
Surname		First Name				MI	
Mailing Address:	No., Street, Barrio, Town, Province/City			Contact No.	Age	Sex	
Date of Birth	LRN (if any)			Date of Examination			
Name and Address of School Last Attended				Grade Level Completed/Finished		Division Code	
Place and Date of Registration				Purpose of Examination			
Examination Center				<input type="checkbox"/> Placement <input type="checkbox"/> Validation <input type="checkbox"/> Subject Completion			

Examination Center

Applicant's Signature Over Printed Name

NOTES:

1. Fill-out all blanks in the Registration Form.
2. Upon registration, the Registering Official will inform you of the place where you are to take the PEPT.
3. On examination day, the test will start exactly at 7:30 a.m. Bring with you this form and 2 lead pencils. You may also bring snacks and lunch that you can take during the break.



1" X 1"  
Picture  
with name tag

FEBRUARY 2021

Certified True and Correct:

Division Testing Coordinator's Signature Over Printed Name

**Enclosure No. 2: Medical Declaration Form**

Republic of the Philippines  
Department of Education  
Division of \_\_\_\_\_  
Region \_\_\_\_\_

**Medical DECLARATION FORM**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_

*Directions:* The following are medical conditions that are considered comorbidities of Covid-19. Each item is answerable by yes or no. Answer each item honestly by putting a check in the box that corresponds to your answer.

<b>Do you have:</b>	<b>Yes</b>	<b>No</b>
a. cancer		
b. kidney disease		
c. diabetes		
d. hypertension or high blood pressure		
e. pulmonary disease/conditions (tuberculosis, asthma, cystic fibrosis, etc.)		
f. liver disease, e.g. especially cirrhosis (scarring of the liver)		
g. weakened immune system due to solid organ or bone marrow transplant		
h. heart conditions, such as heart failure, coronary artery disease, or cardiomyopathies		
<b>For women only, are you pregnant?</b>		

I express my consent for and authorize DepEd to collect, process, and keep my personal information on my medical conditions for the screening purposes in the registration for Philippine Educational Placement Test and in compliance with the Data Privacy Act of 2012 (RA 10173). DepEd cannot disclose my personal information to any third parties without my explicit permission. It can, however, share said information with its bureaus/offices/service units and external agencies, affiliates, or partners to fulfill programs, activities, and projects requirements; financial, logistic, and contractual obligations; or to comply with law enforcement and legal processes. I certify that I have agreed to the above information and that I am well-informed of the purposes of this endeavor.

\_\_\_\_\_  
Signature over Printed Name

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

### **Enclosure No. 3: PEPT Registration Procedure**

#### **STEPS FOR REGISTRATION:**

1. Contact or proceed to the nearest DepEd School Division Office (SDO) and look for the Division Testing Coordinator (DTC). Advise the coordinator of your interest to take the PEPT.
2. Accomplish the 2020 PEPT Registration Form (See Enclosure 1)

*DTCs can print and reproduce Enclosure 1 of this memorandum for purposes of facilitating registration of PEPT Applicants.*

3. Submit the following requirements to the Division Testing Coordinator:
  - Certified True Copy of Form 137 or School Form 10 (SF10)
  - Photocopy of Birth Certificate or Baptismal Certificate
  - 2 copies of recent 1x1 ID Picture
  - Accomplished Medical Declaration Form
4. Upon evaluation of application and confirmation of eligibility, receive the Applicant's Copy or lower half of the signed registration form. Remember to bring this form on the day of examination.

Note: **NO PAYMENT SHALL BE COLLECTED** from the test applicant upon registration, during test administration and issuance of COR.

#### **For registrants from far-flung barangays and municipalities:**

1. Proceed to the nearest school and look for the School Testing Coordinator (DTC). Advise the coordinator of your interest to take the PEPT.
2. Accomplish the 2020 PEPT Registration Form. (See Enclosure 1)

*STCs can print and reproduce Enclosure 1 of this memorandum for purposes of facilitating registration of PEPT Applicants.*

3. Submit the following requirements to the School Testing Coordinator:
  - Certified True Copy of Form 137 or School Form 10 (SF10)
  - Photocopy of Birth Certificate or Baptismal Certificate
  - 2 copies of recent 1x1 ID Picture
  - Accomplished Medical Declaration Form

*STCs shall submit all registration requirements of PEPT applicants to the DTC or SDO personnel in charge of PEPT registration. Upon evaluation of application and confirmation of eligibility, STCs shall receive the duly signed Applicant's Copy or lower half of the Registration Form from the DTC. STCs shall in turn, return the said form to the PEPT applicant prior to the conduct of the test.*

4. Remember to bring the other half of the Registration Form on the day of examination

**Enclosure 4: Format of Data to be Submitted to BEA (in MS Excel Format)**

**Sheet 1: Total No. of Applicants per Testing Center**

<b>List of Testing Centers</b>	<b>Total No. of Registered Examinees in the Testing Center</b>	<b>Total No. of Applicants who will use TB No. 1 (Elementary-K-G6)</b>	<b>Total No. of Applicants who will use TB No. 1 (JHS/G7-G10)</b>

**Sheet No. 2: Masterlist of Examinees**

<b>Name of Examinee</b>	<b>Purpose of Examination (Placement, Validation, Back Subjects, etc)</b>	<b>Age</b>	<b>Birth Certificate submitted (Please check)</b>	<b>Last Grade Level Passed</b>	<b>Grade Level/s or Subject/s to take</b>	<b>Certified True Copy of School Record Submitted (Please check)</b>	<b>Identification (ID) Picture submitted (Please check)</b>	<b>Medical Declaration Form Submitted</b>

**Note: Other than the data in MS Excel Format, a PDF copy of the data, duly signed by the SDS shall be submitted to BEA to serve as basis for funds to be downloaded.**