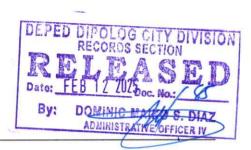


Republic of the Philippines

Department of Education

REGION IX – ZAMBOANGA PENINSULA SCHOOLS DIVISION OF DIPOLOG CITY



February 10, 2025

DIVISION MEMORANDUM No. (7, s. 2025

INSTITUTIONALIZATION OF DIVISION FEDARATION SUPREME SECONDARY LEARNER GOVERNMENT (DFSSLG) AND DIVISION FEDERATION LEARNER FORMATOR TEACHER-ADVISERS AND COORDINATORS (DFLFTAC) JOINT QUARTERLY MEETINGS

To: Secondary School Principals SSLG Teacher-Advisers SSLG Presidents This Division

- 1. In pursuit of the effective implementation of the Department of Education Bureau of Learner Support Services' Learner Government Program (LGP) and Learner Formators Enhancement Program (LFEP), this Division formally institutionalizes the DFSSLG & DFLFTAC Joint Quarterly Meetings to ensure continuous collaboration, alignment, and capacity-building among learner-leaders and formators.
- This initiative aims to:
 - Strengthen the governance and leadership capacities of student-leaders under the Division Federation of Supreme Secondary Learner Government (DFSSLG) and the Division Federation of Learner Formators and Teacher-Advisers Council (DFLFTAC);
 - Provide a platform for sharing best practices, challenges, and solutions concerning student leadership, governance, and learner welfare programs, all while fostering inter-school collaboration and synergy;
 - Align division-wide learner government initiatives with the policies and thrusts of DepEd; and
 - Ensure a structured system for monitoring and evaluating learner-led and formator-driven programs while providing regular updates on progress, challenges, and implementation of projects and activities.
- 3. The indicative schedule and hosts for the DFSSLG & DFLFTAC Joint Quarterly Meetings are as follows:

Quarter	Date	Venue	Hosts
1 st Quarter	February 15, 2025	SBM Hub of Zamboanga del Norte National High School, Estaka	ZNNHSGulayon ISPunta NHSSta. Filomena IS









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			ZNINIIO Trans
2 nd Quarter	May 19, 2025	Dan Ed Dinalas Tuainina	ZNNHS Turno NHC
		DepEd Dipolog Training	Sicayab NHS
		Center	Sinaman IS
			 Pamansalan ETHS
3 rd Quarter	July 26, 2025	DepEd Dipolog Training Center	Miputak NHS
			Galas NHS
			 Upper Dicayas IS
			Tubod IS
4 th Quarter	October 11, 2025	DepEd Dipolog Training Center	Dipolog City NHS
			Cayasan IS
			Cogon NHS
			 AQUMATSHS

- 4. The **host schools** are responsible for preparing the *tarpapel*, screen, projector, and a set of snacks. Schools assigned per quarter shall pool their funds to accommodate 34 to 40 attendees, depending on the invited officers and other participants. Expenses incurred for these activities should be sourced from the School MOOE, PTA-VSC Funds, or other available funds, subject to standard accounting and auditing procedures.
- 5. **The Joint Quarterly Meetings shall be conducted on Saturdays** from 8:00 a.m. to 12:00 p.m. for a minimum of four hours to avoid disrupting weekday instructional hours dedicated to teaching and learning.
- 6. Teaching personnel in attendance will be granted 0.75 service credits for a four-hour meeting and 1.50 service credits for an eight-hour meeting. Likewise, non-teaching personnel involved will receive an equivalent amount of Compensatory Overtime Credits (COC).
- 7. In the event of an emergency meeting, a separate advisory will be issued, with the DLFU automatically designated as the host. All established guidelines shall still apply.
- 8. Teacher-advisers must secure and collect **parental consent forms** each quarter and submit them to the DLFU on the day of the meeting. See **Enclosure 1** for the template.
- 9. For clarifications and inquiries regarding this issuance, all concerned parties are directed to coordinate with the Division Learner Formation Unit (DLFU).
- 10. Utmost compliance in this matter and immediate dissemination of this memorandum is directed.









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(Enclosure 1 of Division Memorandum No. _____, s. 2025)

PARENT/GUARDIAN'S CONSENT FORM

Name of learner:	
Date of birth:	
Allergies:	
Blood type:	
Parent/Guardian's Name:	
Relationship to learner:	
Home address:	
Contact number:	
Adviser/Teacher's Name:	
School:	
Contact Number:	
Activity:	
Date:	
Time:	
Venue:	
As the parent/guardian of the abovementioned lethave been informed of the details of the off-campus activity my child to participate in this off-campus activity. Fur associated with an off-campus activity and agree that the for the said activity are for the safety and security of the instruct my child or children to obey them. I also authorize the oversight proponent of the activity, in accordance with the Data Privacy Act of 2012. Having understood all the aforementioned, I her children to participate, acknowledging all of the foregoin providing travel insurance and any expenses for my childrentivity.	rity and voluntarily and freely electric thermore, I understand the risks of rules and regulations established the participants, and thus agree to trivity to gather and utilize the data mages, that may arise during the reby consent to allow my child on ag. I am also solely responsible for
Parent/Guardian's Printed Name & Signature	Date









 $\label{lem:condition} \begin{tabular}{ll} Address: Purok Farmers, Olingan, Dipolog City \\ Email: youthformation.dipolog@deped.gov.ph \end{tabular}$

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