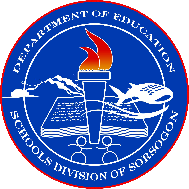
Republic of the Philippines

Department of Education

Region V

**DIVISION OF SORSOGON**

Sorsogon

**EQUIVALENT RECORD FORM**

(Submit to DepEd in 3 Copies)

**NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sex: \_\_\_\_**

(Surname) (Given Name) (M.J)

**Employee No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Authorized Position Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of School/District: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Item No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ P.D. No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Authorized Salary: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Contact No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **EDUCATIONAL ATTAINMENT AND CIVIL SERVICE ELIGIBILITY :**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Titles, Degree of Highest**  **Grade Attained** | **Name of Institution** | **Year**  **Received** | **Civil Service**  **Examination** | **Rating** | **Date** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

1. **SERVICE RECORDS**

**ATTACHED DULY CERTIFIED SERVICE RECORDS**

1. **EQUIVALENT UNITS: (Public Only)\_\_\_\_ years: Equivalent: \_\_\_\_\_\_\_\_\_\_**
2. **Total No. of Years of Teaching ( Present Degree) \_\_\_\_ Equivalent: \_\_\_\_\_\_\_\_\_\_**
3. **DEGREE to Degree Equivalent**

|  |  |  |
| --- | --- | --- |
| **School**  **Year** | **Number of Units** | Description |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

1. **AREAS of Equivalent**
2. **Professional Study**
3. **Teaching Experience**
4. **Public School**
5. **Private School**
6. **Adm. Supervisory Experiences**
7. **Public School**
8. **Private School**
9. **Others (Seminars,Workshop, etc)**

**TOTAL**

**LATEST EFFICIENCY RATING:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Teacher’s Signature)**

**Note: Teacher Do Not Write Below**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| DIVISION  CLASSIFICATION | DATE  PROCESSED | RANGE  ASSIGNMENT | SALARY  RANGE | SCHEDULE  SALARY | REMARKS |
|  |  |  |  |  |  |

**RECOMMENDING APPROVAL: CERTIFIED CORRECT:**

**WILLIAM E. GANDO, CESO VI JEFF HOWELL I. MAPE**

**Schools Division Superintendent P-I / OIC-HRMO**

1. **Deped, Regional Office Action**

**Classification \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Range: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date Approved /Processed \_\_\_\_\_\_\_\_\_\_ Post Audited at Range\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**