



Republic of the Philippines
Department of Education
REGION VII – CENTRAL VISAYAS
SCHOOLS DIVISION OF NEGROS ORIENTAL

**Office of the Schools
Division Superintendent**

DIVISION MEMORANDUM
SGOD-2024- 0128

TO: **Public Schools District Supervisors Concerned
Public School Heads Concerned
Public Career Guidance Coordinator Concerned**

FROM: 
NERI C. OJASTRO EdD, CESO V
Schools Division Superintendent

SUBJECT: **GLOBAL PROJECT CHILDREN'S CONSULTATION BY KAPASKI**

Date: February 21, 2024

1. Attached is the communication letter from Katilingbanong Pagtagad Alang sa Kauswagan, Inc. (KAPASKI) which announces the conduct of **Global Project Children's Consultation on February 23, 2024 (9:00 AM) at Casa Antonio, located in 1st Building, Mabini Street, Barangay Suba, Bayawan City.**
2. Anent this, the participants of the said activity will compose of **1 leaner representative and will be chaperon by their teacher-adviser/teacher representative** of the 16 identified Child Protection Program pilot schools. Student participants are required to submit their original parents' consent, waiver, confidentiality, and non-disclosure agreement during the said activity (please see enclosures).
3. Public School Supervisor and School Head concerned are enjoined to support the said activity and reminded that participation of learners and teachers shall be subject to the no-disruption-of-classes policy stipulated in DepEd Order No. 009, s. 2005.
4. Meals, snacks, and transportation expenses of the participants will be provided by KAPASKI. Other incidental expenses of the selected participants will be charged against School MOOE, and another fund source/s. All are subject to the usual accounting and auditing rules and regulations.
5. Please refer to the enclosure of this memorandum for guidelines and other details.
6. For the information guidance and compliance of all concern.

NCO/EQA-RAV/SGOD/FRP/JeyleneECerial
February 21, 2024

Address: Kagawasan Avenue, Capitol Area, Daro, Dumaguete City
Telephone Nos.: (035) 225-2838 / 225-2376 / 422-7644



DepEd TAYO SDO Negros Oriental



negros.oriental@deped.gov.ph



www.depednegor.net



Republic of the Philippines
Department of Education
 REGION VII – CENTRAL VISAYAS
 SCHOOLS DIVISION OF NEGROS ORIENTAL

GLOBAL PROJECT CHILDREN'S CONSULTATION BY KAPASKI
LIST OF LEARNERS PATICIPANTS

Position	Name	Gender	Grade Level	School
SELG President	Princess Juneth G.Armentano	Female	Grade 5	Manalongon-NNLCS
SELG President	Clyde G.Rosales	Female	Grade 5	Mabuhay E/S
SSLG President	Maria Rey Bactol	Female	Grade 11	Caziano Z. Napigkit NHS

Santa Catalina -2

SSLG President	Roel S. Panoncillon	Male		Nagbinlod HS
SELG President	Jenela Jañal	Female	Grade 5	Nagbinlod ES
SSLG President	Rogen R. Belotindos	Female	Grade 11	Nagbalaye HS

Santa Catalina -3

SELG President	Roxan T. Hungoy	Female	Grade 5	Sta. Catalina CES
SSLG President	Roland Joseph Dela Peña	Male	Grade 11	Sta. Catalina National High School

Santa Catalina -4

SSLG President	Bea Mae G. Paulo	Female	Grade 11	San Miguel HS
SSLG President	Jerah Mae Branzuela	Female	Grade 10	Obat HS
SELG President	Ariane R. Pandac	Female	Grade 5	Buenavista ES
SELG President	Alexis Grey D. Lasconia	Female	Grade 5	Caranoche CES
SELG President	Joel Q. Manubag	Male	Grade 5	Kabulakan ES
SELG President	Alvin John C. Paculanang	Male	Grade 5	Mansagomayon ES

Siaton -4

SELG President	Stephanie Duran	Female	Grade 4	Giligaon ES
SSLG President	Jimar M. Acebis	Male	Grade 11	Giligaon High School

Address: Kagawaran Avenue, Capitol Area, Daro, Dumaguete City
 Telephone Nos.: (035) 225-2838 / 225-2376 / 422-7644



DepEd TAYO SDO Negros Oriental



negros.oriental@deped.gov.ph



www.depednegor.net



Philippines 2 9 5 6

KATILINGBANONG PAGTAGAD ALANG SA KAUSWAGAN, INC.



February 05, 2024

Dr. NERI C. OJASTRO EdD, CESE
Schools Division Superintendent
Negros Oriental

Attention: Ms. Jaylen E. Cerial
Youth Formation Section

Dear Dr. Ojastro:

Good day!

KAPASKI will be conducting a one-day Global Project Children's Consultation, which will take place on February 23, 2024 at 9:00 AM to 5:00 PM at Casa Antonio, located in 1st Building, Mabini Street, Barangay Suba, Bayawan City. This consultation was formulated for the purpose of enjoining partners of Stairway Foundation and KNH Philippines vis-à-vis the Global Program. The main purpose of the children's consultation is to work with children in developing key messages on **Anti-Online Sexual Abuse and Exploitation on Children and Online Sexual Abuse Exploitation Material** prevention.

Objectives: At the end of this consultation session, the children and youth participants are expected to;

1. Know how to ICT contributes to the realization of Children's Rights.
2. Understand various Child Online Protection Concerns;
3. Be introduced to the salient points of RA11930;
4. Transform the identified RA11930 salient points into child friendly messaging.
5. Contribute ideas on how to popularize RA11930.

It is for this reason that we are requesting one representative from our Child Protection Program pilot schools to participate for the consultation:

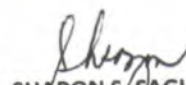
DISTRICT 1	DISTRICT II	DISTRIT III	DISTRICT IV	DISTRICT IV-SIATON
Mabuhay Elementary School	Nagbinlod Elementary School	Santa Catalina Elementary School	Obat High School	Giliga-on H.S
Manalongon Elementary School	Nagbinlod High School	Santa Catalina High School	Caranoche E.S	Giliga-on E.S
Casiano Z. Napigkit High School	Nagbalaye High School		Kabulakan E.S	
			Mansagomayon E.S	
			San Miguel H.S.	
			Buenavista E.S	

KAPASKI will provide meals and transportation for both learner representative and the adult chaperone. Along with this letter are some documents needed to be accomplished by participants.

May our request be granted. For clarifications, please contact us at 0995-387-9672.

Thank you very much for the continued partnership.

Respectfully yours,


SHARON S. SAGUBAN
Executive Director
KAPASKI

**CONSENT TO PROCESSING OF DATA
AND CONFIDENTIALITY AND NON-DISCLOSURE AGREEMENT
(FOR MINOR ASSISTED BY THEIR PARENTS AND/OR GUARDIAN)**

I am the parent/guardian of _____, a
participant in the _____ activity entitled
to be held on
_____ at the _____.

Meanwhile, I, _____, am a participant
to the said activity.

WE understand the sensitive and confidential information may be processed from the
participants.

WE consent to the processing of the information.

WE, likewise, agree to keep in strict confidence any information regarding the participant that
comes to our attention while at the activity.

WE will do this in accordance with the Data Privacy Act of 2012.

Name of the Participant:	Name of the Parent/Guardian:
Signature of the Participant:	Signature of the Parent/Guardian:
Date Signed:	Date Signed:

**CONFIDENTIALITY AND NON-DISCLOSURE AGREEMENT
(FOR ADULT PARTICIPANTS)**

I am a participant in the activity entitled _____
_____ to be held on _____ at the
_____.

I understand that sensitive and confidential information may be processed from the participants.

I agree to keep in strict confidence any information regarding any participant that comes to my attention while at the activity.

I will do this in accordance with the Data Privacy Act of 2012.

Name of the Participant:	Name of Witness:
Signature of the Participant:	Signature of Witness:
Date Signed:	Date Signed:

Image consent form

We will not permit photographs, video or other images of children to be taken without the consent of the child and their parents/guardians.

The organizers shall take all steps to ensure that these images are used solely for the purposes they are intended. If you become aware that these images are being used inappropriately you should inform the organizers immediately.

Consent information:	
<i>To be completed by child and/or parent:</i> <ul style="list-style-type: none">• I give permission for my child to be photographed and/or filmed during the conduct of the activity• I give permission for my child's photograph to be used within Stairway's printed publications• I give permission for my child's photograph/video to be used on Stairway's website and social media page.	
Signature and printed name of child:	Signature and Printed name of parent/guardian:
Date:	

If you have any concerns with this consent form, or any other usage of the photos/videos, please contact us via: _____

Health Declaration Form

Please provide the following information of the child participant;

The information in this form will be kept confidential; only medical professionals and members of the child-protection team will be allowed access to it.

1. Name of child:
2. Person to contact in case of emergency: (Name, Relationship, Address / Mobile Number)
3. Allergies of the child (to food, conditions, insect bites, medication):
4. Blood type of the child:
5. Medication being taken by the child:
6. Any existing conditions of the child (for example, asthma, epilepsy, disabilities, low blood pressure, prone to migraines/fainting/dizziness, depression/anxiety):
7. Food restrictions of the child:

Guardians Name Signature/Date

{Date}

CONSENT

I, the undersigned, willfully and voluntarily give consent on the participation of my child in the _____ who also expressed his/her full interest to join the _____ to be held on _____, _____ from _____ A.M- _____ P.M.

I have considered the benefits that my child will obtain from his participation provided that due care and precautions will be observed to ensure the comfort and safety of my child and that the organizers may not be held responsible for any untoward incident that may happen beyond their control.

Respectfully yours.

{Signature over Printed Name of Parent/Date)

{Signature over Printed Name of the Participating Child/Date)
