

Department of Education

REGION III- CENTRAL LUZON SCHOOLS DIVISION OF SCIENCE CITY OF MUÑOZ

29 October 2024

SCHOOLS DIVISION MEMORANDUM

No. 362

s. 2024

DISSEMINATION OF DEPED MEMORANDUM NO. 053, S. 2024: IMPLEMENTATION GUIDELINES FOR DEPED ORDER NO. 005, S. 2024

Assistant Schools Division Superintendent To: Chief Education Supervisors Schoolheads, Public Integrated/ Secondary Schools All Others Concerned

- 1. For information, guidance, and strict compliance of all concerned, this office, through the School Governance and Operations Division (SGOD), announces the issuance of DepEd Memorandum No. 053, s. 2024, titled, Implementation Guidelines for DepEd Order No. 005, s.2024.
- 2. School heads are directed to download a copy of this Memorandum through the link https://tinyurl.com/DM53s2024 and to ensure its proper implementation and compliance.
- 3. In addition, school heads are instructed to resubmit a Designation Order for teachers assigned to teaching-related tasks, using the standard template on or before November 5, 2024.
- 4. Enclosed to this Memorandum are the standard templates provided in the DepEd Memorandum.

Enclosure No. 1: Designation Order for Teaching-Related Assignments

Enclosure No. 2: Certificate of Undertaking

Enclosure No. 3: Locator Slip

Enclosure No. 4: Authority to Render Work Beyond Regular Working Hours for Teaching - Related Assignments (TRA)

Enclosure No. 5: Individual Accomplishment Report for TRA

Enclosure No. 6: Endorsement for the Processing of Payment for Teaching Overload

5. Immediate and wide dissemination of this Memorandum is enjoined.

JOHANNA N. GERVACIO PhD, CESO V Schools Division Superintendent 4

Encl: As stated

14/October 29, 2024

To be indicated in the Perpetual Midex.... Under the following subjects

POLICY IMPLEMEN WWP/SGOD: Division Implementation Team

MONITORING

TECHNICAL ASSISTANCE

Address: Telephone No.: (044) 806 -2192

Brgy. Rizal, Science City Muñoz,

3119

Email

DESIGNATION ORDER FOR TEACHING-RELATED ASSIGNMENTS

The following personnel are hereby designated to the following teaching-related assignments:

No.	Teaching- related Assignment	Name of Personnel	Position	Duties and Responsibilities	Signature of Concerned Teacher
Scho	ol Coordinator		<u> </u>	<u> </u>	louciei
		W4444			
		7			
		,			

Train	er/Adviser				
	<u> </u>				
	7-14				
Chair	manship				
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	<u> </u>				

As such, the abovementioned personnel are expected to perform the key duties and responsibilities specified above. This designation order shall be valid for [Duration of Designation Order].

Designated teachers are also authorized to render work beyond regular work hours and shall be granted equivalent Vacation Service Credits (VSC).

Recommended by:

[Name of School Head]

[Position] [School]

Approved by:

[Name of Schools Division Superintendent]

[Position] [SDO]

Copy furnished:

SDO-SGOD

SDO-Administrative Unit (Personnel Section)



Department of Education

(INSERT DIVISION)
(INSERT NAME OF SCHOOL)

CERTIFICATE OF UNDERTAKING

This is to certify that, I, [Name of Teacher], a [Position] at [School Name], located at [School Address], performed teacher ancillary tasks outside the school premises on the following dates and time:

Date	Time

I hereby attest that the ancillary tasks were performed diligently and responsibly and that they were completed accurately and on time.

This certification is prepared and submitted as an attachment to the Daily Time Record for the period: **[payroll period].**

[SIGNATURE]
[NAME OF TEACHER]
[DATE]





Department of Education

(INSERT DIVISION)
(INSERT NAME OF SCHOOL)

LOCATOR SLIP

Name	
Position/Designation	
Permanent Station	
Purpose	
Date & Time	
Destination	
[Signature] [Name of Teacher]	[Signature] [Name of School Head]



Department of Education

(INSERT DIVISION)
(INSERT NAME OF SCHOOL)

AUTHORITY TO RENDER WORK BEYOND REGULAR WORKING HOURS FOR TEACHING-RELATED ASSIGNMENTS

Authority is hereby requested to perform the following tasks/activities beyond regular working hours:

Name	
Position	
Designated as	Water Committee

Date and Time (Hours to be rendered)	Purpose/ Tasks to be Accomplished	Justification

Requested by:

[Name of Teacher]

[Position]

[School]

Approved by:

[Name of School Head]

[Position]

[School]



Department of Education

(INSERT DIVISION)
(INSERT NAME OF SCHOOL)

INDIVIDUAL ACCOMPLISHMENT REPORT FOR TEACHING-RELATED ASSIGNMENTS

Name	
Position	
Designated as	

Date	Hours Rendered	Accomplishments/Outputs	

Submitted by:

[Name of Teacher]

[Position] [School]

Approved by:

[Name of School Head]

[Position] [School] [School ID]

Required attachments:

- A. Approved Designation Order
- B. Approved Authority to render work beyond regular working hours



Department of Education

(INSERT DIVISION)
(INSERT NAME OF SCHOOL)

OFFICE OF THE SCHOOL HEAD

FOR

: [NAME OF SDS]

(Position, SDO)

THRU

: [NAME OF SDO-HRMO]

[Position, Office]

FROM

: [NAME OF SCHOOL HEAD]

(Position, School)

SUBJECT

: [INSERT SUBJECT]

DATE

: [Insert date]

This Office respectfully submits the following documents for the processing of the payment of teaching overload:

- 1. Certification/List of eligible teachers with teaching overload;
- 2. DTR; and
- 3. eSF7

For questions or concerns, you may contact (insert name of school) at telephone number (insert school's contact number) or through email address at (insert school's email address if there's any).

