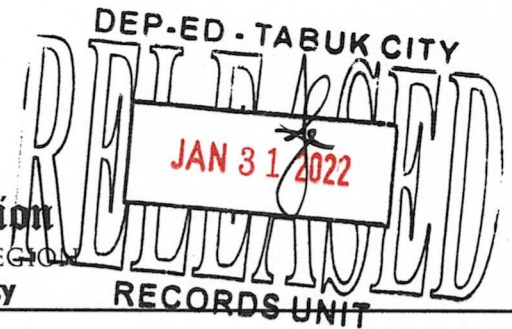




Republic of the Philippines  
**Department of Education**  
CORDILLERA ADMINISTRATIVE REGION  
Schools Division of Tabuk City



Office of the Schools Division Superintendent

31 January 2022

**DIVISION MEMORANDUM**

No. 25, s. 2022

**SUBMISSION OF NAMES OF EXAMINEES FOR THE PHILIPPINE EDUCATIONAL  
PLACEMENT TEST (PEPT)**

To: School Heads/ Administrators of Public and Private Schools  
Public Schools District Supervisors  
All Others Concerned

1. Please be informed that the Division Office is planning to request the Bureau of Education Assessment (BEA) to administer the Philippine Educational Assessment Test (PEPT) to all qualified learners.
2. Considering this, all public and private schools are requested to submit their possible list of examinees for the PEPT. Examinees to be included are those :
  - a. learners with no LRN or Learner Reference Number - those not registered in the Learner Information System (LIS);
  - b. learners who are over age in their current grade levels; and
  - c. learners who have no school records in the previous grade levels.
3. The attached template should be accomplished to be submitted on or before February 11, 2022 at the Records Unit of the Division Office.
4. For the information and compliance of all concerned.

**IRENE S. ANGWAY PhD, CESO VI**  
Assistant Schools Division Superintendent and  
OIC, Office of the Schools Division Superintendent

sgod/smme/aka/Memo\_Learner\_LIS\_Status.docx  
January 31, 2022



**Address:** Bulanao Central School Compd., Purok 2, Bulanao Norte, Tabuk City, Kalinga  
**Email:** tabuk.city@deped.gov.ph  
**Website:** <https://www.depedtabukcity.com>

**LIST OF EXAMINEES FOR THE PHILIPPINE EDUCATIONAL PLACEMENT TEST (PEPT)**

Name of School: \_\_\_\_\_ Complete Address: \_\_\_\_\_  
 Name of School Head: \_\_\_\_\_ Contact Number: \_\_\_\_\_ Official Email: \_\_\_\_\_

No.	Name (Last Name, First Name, MI)	Sex	Age	Date of Birth (MM-DD-YYYY)	Last Grade Level Completed	Complete Address	Contact Number	With LRN? (Yes   No)	Reasons why learner has NO LRN or NO Records

Prepared/submitted by: \_\_\_\_\_

\_\_\_\_\_  
 Name and signature of authorized school representative

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