

#### Republic of the Philippines

## Department of Education

REGION VIII SCHOOLS DIVISION OF CALBAYOG CITY

October 8, 2025

MEMORANDUM DM-SGOD-YFD 401, S. 2025

## CALL FOR PARTICIPANTS TO THE LEARNERS' CONVERGENCE PHILIPPINES (LearnCon Ph) 2025

TO: SGOD and CID Chiefs

Education Program Supervisors School District Supervisors

School Heads (Public & Private Secondary Schools)

All Others Concerned

- 1. This is in relation to the conduct of the Learners' Convergence Philippines (LearnCon PH) 2025 in Dumaguete City from October 27 30, 2025. This event is spearheaded by the office of Bureau of Learner Support Services Youth Formation Division (BLSS-YD).
- 2. In this connection, this office thru the SGOD-Youth Formation Unit is calling for eligible participants who are bona fide learners of any secondary school under this Division and be physically fit to travel and fully engage in all conference activities.
- 3. The event's theme is "GalingKabataan: Boses Mo, Bukas Natin," which will celebrate and showcase the leadership, advocacy, creativity, and impact of Filipino youth, stressing the power of the learner's voice in shaping our nation's future.
- 4. The division delegation shall be composed of three (3) Chaperones and nine (9) secondary learners (both male and female) with strong advocacy and active membership in club/s or organizations aligned with the following focus areas and groups:
  - a. Leadership, Governance and Civic Engagement;
  - b. Health and Well-being;
  - c. Gender and Social Inclusion:
  - d. Climate Action, Environmental Protection and Agriculture
  - e. Innovation, Entrepreneurship and Future Readiness;



- f. Culture, Arts and Peace;
- g. Indigenous People (IP);
- h. Learner with Disability (LWD);
- i. Alternative Learning System (ALS)
- 5. The learner representatives shall submit the following requirements;
  - i. signed Parental Consent and Waiver Form (Annex A)
  - ii. Medical Certificate issued by the SDO Medical Officer, and
  - iii. Scanned copy of:
    - school identification card for the learner-representatives; and
    - employee identification card for the chaperones

For reference, editable forms may be downloaded and accessed through this link: <a href="https://tinyurl.com/LEARNCON2025FORM">https://tinyurl.com/LEARNCON2025FORM</a>).

- 6. In line with, this office, hereby requested all secondary schools' heads to select and recommend learner/s from their school who is/are
  - a. bona fide secondary school learners by School Year 2025-2026;
  - b. with good moral character;
  - c. physically fit to travel and capable of participating actively and collaboratively in all activities; and
  - d. able to represent any of the following learner-representations prescribed in paragraph no. 4 of this memorandum. Recommended participants shall be submitted to the OSGOD-YFD on or before **October 11, 2025.**
- 7. Travel expenses and other incidental expenses of selected learner participants shall be charged to their Local Funds/MOOE and other fund source/s while the Chaperones (YFD Coordinators/Non-teaching personnel/Club/Org. Teacher-Adviser) may be charged to the LSP 2025 Funds (downloaded program support funds, Local Funds, MOOE, Local School Board-Special Education Fund (LSB-SEF), and other fund source/s, subject to the usual accounting and auditing rules and regulations.
- 8. The travel expenses, personal insurance, and other incidental expenses of private school learner representative shall be charged to their own account and/or other fund sources, subject to usual accounting and auditing rules and regulations. All private school learner representative shall be accommodated in the billeting areas together with their respective regional representatives.





- 9. No additional chaperone shall be dedicated to private school learner-representatives. The three (3) chaperones identified by the SDO shall also be the chaperone of the private school learner-representative. However, if a private school chaperone wishes to join, all arrangements and expenses in relation to his/her attendance must be personally made and charged to his/her account.
- 10. Further details regarding the registration process, specific mechanics for the convergence will be disseminated in a separate memo and for inquiries regarding the activity please contact Ms. Marian T. Cabonegro, Division Youth Formation Coordinator through email at <a href="mailto:lfd@calbayog.ph.education">lfd@calbayog.ph.education</a> or can be reached at 0995-3692499.
- 11. Immediate dissemination of and compliance with this Memorandum are desired.

MARGARITO A. CADAYONA JR. PhD. CESO VI

Schools Division Superintendent of 5.0. # 74 5. 2015







### PARENTAL CONSENT AND WAIVER FORM

I, ====================================	, as	the	parent	or	legal	guardian	of
	_, here	by ack	nowledge	that	I have	been inform	ned
of the details of the conduct of the LEAR	NERS'	CONV	ERGENC	E PH	ILIPPI	NES 2024 t	hat
will be held on October 27-30 at Dumas	guete C	ity. N	egros Ori	enta	1.		

I understand that the Bureau of Learner Support Services-Youth Formation Division (BLSS-YFD) of the Department of Education (DepEd) shall implement the minimum public health standards set by the government to minimize the risk of the spread of any communicable disease, but it cannot guarantee that my child will not become infected.

I understand that my child's in-person attendance at the event will include associating with teachers, fellow learners and school personnel, and other persons inside and outside of the school that may put my child at risk of transmission of any communicable disease, notwithstanding the precautions undertaken by the implementing team.

#### **Voluntary Participation**

I acknowledge that my child's participation in this activity is completely voluntary. My child may decline to participate or withdraw from participation at any time for any reason. Declining or withdrawing participation will not result in any penalty or loss of benefits or reduction of any basic right to which my child is entitled. While there remains the risk of possible transmission of any communicable disease to my child/ren, and to the members of my household, I freely assume the said risk and I permit my child/ren to attend this activity.

#### Exclusion (Limitations/Ineligibility)

I am aware that symptoms of any communicable disease include, but are not limited to, fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, the new loss of taste or smell, sore throat, congestion or runny nose, nausea, vomiting, and diarrhea.

I confirm that my child currently has none of those symptoms and is in good health. I will not allow my child to physically go to the event if my child or any member of my household develops any of the said symptoms or any other symptoms of illness that may or may not be related to any communicable disease. I will also inform the school/division and not allow my child to attend the event if my child or any of my household members test positive for any communicable disease. My child/ren and I, with my household members, will follow the required health and safety protocols and procedures adopted by the school and community.

#### Documentation





I confirm that I give full permission in any recording or picture taken of my child during the conduct of this event and to use some or all my child's images/ contribution/ performance in any publication (including electronic publications such as film or website) created by or for the BLSS-YFD and to release this material to DepEd official platforms.

#### Confidentiality

I am aware that any information that will be given during the activity will be kept strictly confidential, and personal information will be treated in accordance with the Republic Act 10173, Data Privacy Act of 2012. I am assured that the information about my child will not be shared outside of the implementation team. My child's name will not be used when data from this activity is analyzed.

I hereby confirm that I agree and understand the commitment of my child as a participant. I also understand and will support my child's endeavor to meet the expectations, guidelines, and responsibilities to his/her fellow participants and to DepEd.

To the extent allowed by law and rules, I hereby agree to waive, release, and discharge any and all claims, causes of action, damages, and rights against the school/division and its personnel as well as officials and personnel of the Department of Education relative to the conduct of the activity.

With full understanding, I - on behalf of myself, my household members, and my child/ren - hereby freely and voluntarily give my consent to my child's participation in the activity from July 8 to 13, 2024. I also attest that I had sought the views of my child and he/she has expressed a willingness to participate in the activity.

### CONTACT DETAILS FOR QUESTIONS OR PROBLEMS

For any concerns or clarification, you may contact the BLSS-YFD through the email address blss.yfd@deped.gov.ph

Signature of Parent/Guardian over Printed Name	Contact Details (Mobile Number)
Name of Child/ren	Date

<sup>\*</sup> Please submit this form to your child's school prior to participation in the event.





#### LEARNER CONSENT, WAIVER, INDEMNITY and RELEASE

(To be completed by the Learner)

parents and/or legal guardian in the Lear.	agreed to participate with the consent of my ners' Convergence Philippines 2025 on <b>October</b>
27-30 at Dumaguete City, Negros Orien	tai.
representatives to make recordings of my which I appear in at the event and location	<b>Repartment of Education (DepEd)</b> and its voice and to take photographs and/or videos in stated above, to be used for the communications of the Department be it in print,
I have read and understood the accompand do not understand, I will ask my I the activity for me.	nying letter and information leaflet. For things I Parent/Guardian to clarify the objective of
I know the purpose of the project/activity DepEd and its representative are not allow that might harm my rights and well-being	y and the part I will be involved in. I know that wed to use the information about me in any form
Name of Learner	Name of School
Age	Date





#### Bepublika ng Dilminas

### Department of Couration

OFFICE OF THE UNDERSECRETARY FOR GOVERNANCE AND OPERATIONS

#### MEMORANDUM OM-OUGOPS-2025-03-US-703

FOR

Undersecretaries

Assistant Secretaries Regional Directors All Others Concerned

FROM

MALCOLM S. GARMA

Undersecretary for Government and Operations

SUBJECT

INVITATION TO THE LEARNERS' CONVERGENCE

PHILIPPINES 2025

DATE

: September 12, 2025

This is in relation to the conduct of the Learners' Convergence Philippines (LearnCon PH) 2025, spearheaded by proponent office Bureau of Learner Support Services - Youth Formation Division (BLSS-YFD), which will be held on October 27-30, 2025, in Dumaguete City.

With the theme \*GalingKabataan: Boses Mo, Bukas Natin, LearnCon PH 2025 seeks to celebrate the excellence, potential, and meaningful contributions of Filipino youth in leadership, advocacy, creativity, and community involvement. The event emphasizes the vital role of every learner's voice in shaping dialogue and decision-making, while also highlighting the shared responsibility, collaboration, and collective ownership of the nation's future.

In this regard, we are pleased to invite you to grace the event as one of our esteemed guests. Your presence will greatly inspire our learners and underscore the Department's unwavering commitment to empowering the youth as partners in nation-building.

To confirm your availability, kindly RSVP through **Dr. Gina L. Cruz**, Senior Education Program Specialist II, via email at this videological period. Our Guest Relations Team will be glad to assist you with any requirements related to your attendance.

For more information, an **Event Briefer** is attached to provide further details about the convergence.

We look forward to your positive response and continued support

Thank you.

BLSS- UFD- 2025 - 09- 059





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