



Republic of the Philippines  
**Department of Education**  
REGION III  
SCHOOLS DIVISION OFFICE OF BATAAN

JUL 11 2023

**DIVISION ADVISORY**

No. 123, s. 2023

To: Assistant Schools Division Superintendent  
Chief Education Supervisors  
Education Program Supervisors  
Public Schools District Supervisors  
Elementary and Secondary School Heads  
All Others Concerned

Relative to *Regional Memorandum No. 322, s. 2023*, this Office informs that the **Linking Standards and Quality Practice (LiSQuP) Scholar Program Cohort I** is still ongoing.

Attached is the *MEMORANDUM-OM-OUHROD-NEAP-2023-0601*, for further details and inquiries.

  
**CAROLINA S. VIOLETA, EdD, CESO VI**  
Schools Division Superintendent

*In compliance with DepEd Order No. 8, s. 2013, this Division Advisory is issued not for endorsement per D.O. 28, s. 2001 only for the information of DepEd Officials, personnel as well as the concerned public.*

SO11



*"We Mould Heroes"*

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Email Address: [bataan@deped.gov.ph](mailto:bataan@deped.gov.ph) | Website: [www.depedbataan.com](http://www.depedbataan.com) | Facebook Page: [www.facebook.com/DepEdBataan](https://www.facebook.com/DepEdBataan)





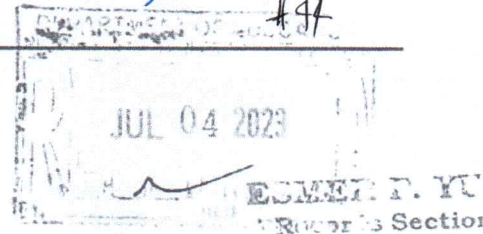
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Republic of the Philippines  
**Department of Education**  
 REGION III-CENTRAL LUZON

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**REGIONAL MEMORANDUM**

No. 322, s. 2023

**UPDATES ON THE NON-COMPLETION OF LINKING STANDARDS  
 AND QUALITY PRACTICE (LiSQuP) SCHOLARSHIP PROGRAM**

To: Schools Division Superintendents

1. This is to announce that the Linking Standards and Quality Practice (LiSQuP) Scholarship Program Cohort I is still ongoing and scholars who submit letter of intent to withdraw from the Program should adhere to the stipulations of DM 82, s. 2020.
2. The aforementioned Memorandum explicitly states that scholars who fail to complete the program due to fault or willful neglect, resignation from the service, transfer to other agencies, voluntary retirement or other causes within their control must refund the tuition and/or registration fees in full to the Department of Education (DepEd) through the National Educators Academy of the Philippines.
3. The amount of tuition and/or registration for the Doctorate and Master's Degree Program which said scholars shall settle are as follows:
  - \* PhD = Php 150,000.00
  - \* MA = Php 120,000.00
4. The procedure of refund is stated in paragraphs 4, 5, and 6 of the enclosed MEMORANDUM OM-OUHROD-NEAP-2023-0601, for information and guidance.
5. Immediate dissemination of this Memorandum to all concerned is earnestly desired.

**MAY B. ECLAR, PhD, CESO III**  
 Regional Director

HRDD1/hrdd7  
 June 30, 2023



Address: Matalino St. D.M. Government Center, Maimpis, City of San Fernando (P)  
 Telephone Number: (045) 598-8580 to 89; Email Address: region3@deped.gov.ph



Certificate No. A.A17-0077

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Republic of the Philippines

**Department of Education**

**NATIONAL EDUCATORS ACADEMY OF THE PHILIPPINES**

**Office of the Director**

**MEMORANDUM**

**OM-OUHROD-NEAP-2023-0601**

To : **Regional Directors**  
**HRDD Chiefs**  
**LiSQuP NEAP-R Focal Persons**  
**LiSQuP SDO Focal Persons**  
**Albert Jerome C. Andres**  
*Chief Administrative Officer, BHROD Personnel Division*  
**All others concerned**

From : **JENNIFER E. LOPEZ**  
*Director III*  
*Officer-in-Charge, Office of the Director IV*

Subject : **NON-COMPLETION OF LINKING STANDARDS AND QUALITY PRACTICE (LiSQuP) SCHOLARSHIP PROGRAM**

Date : June 20, 2023

1. Please be informed that Linking Standards and Quality Practice (LiSQuP) Cohort 1 is still on-going and scholars who submit intent to withdraw from the Program should adhere to the stipulations of DM 82, 2020:

*(g) "Refund in full to DepEd such sums of money as may have been defrayed by the Philippine government for expenses incidental for having attended the program or course, for failure to comply with any of the foregoing conditions through the scholars' fault or willful neglect, resignation from the service, transfer to other agencies, voluntary retirement or other causes within one's control. For reasons beyond the control of the teacher-participant, the conditions do not apply, provided that all documentary requirements including doctor's certification are met and are acceptable to DepEd."*

2. It is clearly stated that scholars who fail to complete the program due to fault or willful neglect, resignation from the service, transfer to other agencies, voluntary retirement or other causes within his/her control must pay the Department of Education (DepED) through the National Educators Academy of the Philippines (NEAP) in full.
3. The amount of Doctorate and Master's Degree Program which concerned scholars should settle are as follows:

- PhD Php 150,000.00
- MA Php 120,000.00

4. Payment shall be made through the Schools Division Office Accounting Office. Indicate in the receipt "Payment for LiSQuP Scholarship." Payment will go to the Bureau of Treasury.
5. Scholars who cannot pay in full must make an arrangement with the SDO/Regional Office through a Promissory Note attached in this Memorandum.
6. Scanned copy of the payment receipt or promissory note must be sent by SDO/RO Cashier to NEAP Central Office and RO via email.
7. For clarifications and/or other concerns, please contact **Ms. Rizza A. Pereyra**, LiSQuP Program Focal through email at
8. For your guidance.

[NEAP-PDD/Pereyra]

## PROMISSORY NOTE

**Date**

**Scholarship:** \_\_\_\_\_

**Program / Course:**

**Amount to be Paid:**

**School:** \_\_\_\_\_

**Schools Division Office:** \_\_\_\_\_ **Region:** \_\_\_\_\_

**For the full amount paid by the National Educators Academy of the Philippines (NEAP) for my scholarship, I, \_\_\_\_\_ of [Address],**

Php \_\_\_\_\_, promise to pay the sum of \_\_\_\_\_  
of payment set forth below: \_\_\_\_\_ in accordance with the mode and schedule

**Schedule and Mode of Payment (Check one)**

**LUMP SUM**

**The lump sum payment shall be made on [Indicate the date]**

## INSTALLMENTS

**Payment shall be made in installment basis following the schedule indicated below:**

[illegible]

In WITNESS WHEREOF, I set my hand under seal this \_\_\_\_ [day] of \_\_\_\_\_ [month], 20\_\_\_\_ and acknowledge receipt of completed copy of this document.

**Scholar's Signature  
over Printed Name**

**Immediate Supervisor's Signature  
over Printed Name**

**Noted:**

**SDO Cashier's Signature  
over Printed Name**

**SDO Accountant's Signature  
over Printed Name**

**Certified:**

**Legal Officer's Signature  
over Printed Name**

**SDO/RO Head of Office Signature  
over Printed Name**