



Republic of the Philippines  
**Department of Education**

REGION XI  
SCHOOLS DIVISION OF DAVAO DEL NORTE

**Office of the Schools Division Superintendent**

**DIVISION MEMORANDUM**  
**CID-2025-0414**

To: Janette G. Veloso, CESO VI – Assistant Schools Division Superintendent  
Eduard C. Amoguis, EdD – Chief Education Supervisor, CID  
All Public Schools District Supervisors

Subject: **DIVISION SCREENING AND ACCREDITATION OF THE 4TH PROVINCIAL WIDE ALS-LYMPICS 2025 OFFICIAL FORMS**

Date: April 2, 2025

1. This Office hereby informs all concerned Coaches and Assistant Coaches of the 4<sup>th</sup> Provincial-Wide ALS-Lympics 2025 about the schedule for the Division Screening and Accreditation of the Official Forms on April 3, 2025, 1:00 PM at the Division ALS Office, Mankilam, Tagum City, Davao del Norte.
2. Enclosed are the following documents for your reference and submission:
  - A. List of Participants
  - B. Official Entry Form
  - C. Waiver & Parental Consent
  - D. List of Delegation
  - E. Athletes Gallery
3. In accordance with DepEd Order No. 9, Series of 2005 (Instituting Measures to Increase Engaged Time-on-Task and Ensuring Compliance Therewith), no disruption of classes shall be observed during the conduct of this activity.
4. Everyone is highly encouraged to continually support and recognize the value of equality and diversity of all personnel while complying with the directives set forth by this office.
5. Immediate dissemination of this Memorandum to all concerned is desired.

**REYNALDO B. MELLORIDA, CESO V**  
Schools Division Superintendent

For the Schools Division Superintendent

  
**ROSALINDA N. DIONIO**  
Administrative Officer V



CID/sds

FN: Division Screening and Accreditation of the 4th Provincial Wide ALS-Lympics 2025 Official Forms

Page 1 of 3



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*Enclosure A: List of Participants*

Activity: Division Screening and Accreditation of the 4<sup>th</sup> Provincial Wide ALS-Lympics 2025  
 Official Forms

Venue: Division ALS Office, Mankilam, Tagum City

Date: April 3, 2025 @ 1:00pm

No.	Sporting Events	Category	Coach/es
1	Badminton	Men	Coach: Ian Jay G. Ramos Asst Coach: Kathlynn Xanthia Pasalgon
	Badminton	Women	
	Badminton	Doubles (Mixed)	Coach: Jennefer T. Notarte Asst Coach: Judy Ann Frias
2	Basketball	Men	Coach: Jomarlu A. Roa Asst Coach: Florence P. Malinao
	Basketball	Women	Main Coach: Beverly E. Ybañez Asst. Coach: Era Kris Garcia
3	Billiards (9-ball)	Men	Coach: Raymart F. Manliguis Asst. Coach: Jannen Marrie D. Pasague
4	Chess	Open	Coach: Arnold, Jr. A. Teorosio Asst. Coach: Abigail M. Magdula
5	Dart	Men	Coach: Beberlyn G. Tuburan Asst. Coach: Gemio S. Hinong
		Women	
6	Essay Writing	Open	Coach: Nena M. Cui
7	Ginoo	Man	Coach: Abigail M. Magdula Asst. Coach: Christine Joy L. Manguio
	Binibini	Woman	
8	Digital Poster Making Contest	Open	Coach: Judy F. Babor
9	Non-Digital Poster Making Contest	Open	Coach: Joyce J. Luna
10	Running	(Men, 100m)	Coach: Rey Orgel Asst. Coach: Jenalyn A. Taylor
		(Women, 100m)	
		(Men, 400m)	
		(Women, 400m)	
		(Men, 4x100m Relay)	
		(Women, 4x100m Relay)	
11	Spoken Word Poetry	Open	Coach: Rose Fe L. Alcos



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12	Swimming	(Men, 50m)	Coach: Keziah Hope G. Baron Asst Coach: Iren C. Mabutin
		(Women, 50m)	
		Relay (4X50m)	
13	Table Tennis	Men Singles	Coach: Jannen Marrie D. Pasague Asst. Coach: Marissa Virtudazo
		Women Singles	
		Mixed Doubles	
14	Vocal Duet	Man & Woman	Coach: Lloyd S. Bravo Asst. Coach: Glaiza T. Almedora
15	Volleyball	Men	Coach: Januard Limikid Asst. Coach: Jesa Mae R. Rubite
	Volleyball	Women	Coach: Beauthylen C. Espina Asst. Coach: Aileen C. Merencillo
16	Modern Dance	Open	Coach: Rheena F. Rosales Asst. Coach: Melody T. Halabaso
17	Mobile Legends	Open	Coach: Michael L. Rabino Asst. Coach: Arnold, Jr. A. Teorosio

Prepared by:

  
SHIELA D. SIONOSA  
Education Program Specialist II-ALS



# 4TH Province-wide ALSlympics 2025

DNSTC, Mankilam, Tagum City

April 12-13, 2025



## OFFICIAL ENTRY FORM

EVENT:			CATEGORY:			
TEAM:						
	SURNAME,	FIRST NAME	MI	ADDRESS	AGE	LRN
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						

### Players Eligibility:

- Only the duly enrolled learners at all levels of ALS in the school year 2024-2025 (*enrolled or transferred not later than December 4, 2024*) in the four (4) divisions of the Department of Education in the Province of Davao del Norte are permitted to play/join in the 4th Provincial ALS-Lympics.

I hereby certify that the abovelisted players are certified enrolled ALS learners of the Department of Education.

Certifying further that all documents submitted are true and correct & that all team members have been oriented with the Official Local Rules of the Game.

Certified this \_\_\_\_\_ day of \_\_\_\_\_, 2025.

# 4TH Province-wide ALSlympics 2025

DNSTC, Mankilam, Tagum City

April 12-13, 2025



## WAIVER

Name:			
Address:			
Email address/Cellphone No.:			
Birthdate:			
Name of School:		Age:	
Division:		Gender:	

(Every participants MUST sign this form in order to join the event)

I hereby state that I am both physically and mentally fit to participate in the **4TH ALS-LYMPICS 2025**. If I do participate, I, on behalf of myself, my heirs and assigns, and my estate, hereby waive and forever discharge the sponsors, organizers, affiliates, as well as their agents and employees, from any all claims that may occur as a result of my participation.

\_\_\_\_\_  
Participant's signature

\_\_\_\_\_  
Date

## PARENTAL CONSENT (17 years old and Below)

I, \_\_\_\_\_, as the parent/legal guardian of \_\_\_\_\_, give my full consent for my child to participate in **4TH ALS-LYMPICS 2025** on **April 12-13, 2025** at DavNor Sports and Tourism Complex, Mankilam, Tagum City, Davao del Norte. I acknowledge and understand that this event may involve risks, including but not limited to physical activities, potential injuries, or unforeseen incidents.

Parent/Guardian's Name:

Signature:

Contact Number:

Date:

# 4TH Province-wide ALSlympics 2025

DNSTC, Mankilam, Tagum City

April 12-13, 2025



## LIST OF DELEGATION

**DIVISION:** DAVAO DEL NORTE

	SURNAME,	FIRST NAME	MI	ADDRESS	EVENTS
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					

Certified true and correct

\_\_\_\_\_  
ALS Coordinator

\_\_\_\_\_  
**REYNALDO B. MELLORIDA, CESO V**  
Schools Division Superintendent





XI  
REGION  
DAVAO DEL NORTE  
DIVISION

E V E N T

<b>athlete</b>	A.	Government issued ID or;		<b>athlete</b>
	B.	Police Clearance		
	C.	A&E Test Registration Form (for learners not enrolled in the LIS)		
		NAME OF ATHLETE		
		LRN		
		DATE OF BIRTH		
		SCHOOL		
<b>athlete</b>	A.	Government issued ID or;		<b>athlete</b>
	B.	Police Clearance		
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	C.	A&E Test Registration Form (for learners not enrolled in the LIS)		
		NAME OF ATHLETE		
		LRN		
		DATE OF BIRTH		
		SCHOOL		

Interviewed By:

Approved By:

Screened By:

Verified by: