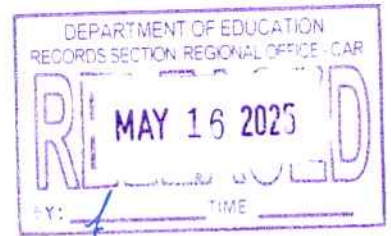




Republic of the Philippines
Department of Education
CORDILLERA ADMINISTRATIVE REGION



16 May 2025

REGIONAL MEMORANDUM

No. **342.2025**

CALL FOR APPLICATIONS FOR THE FRENCH LANGUAGE COURSE

To: Assistant Regional Director
Schools Division Superintendents
All Others Concerned

1. This Office disseminates DM-CT-2025-132 s. 2025 re: Call for Applications for the French Language Course (A1-A2).
2. The course is sponsored by the Embassy of France to the Philippines and Micronesia, the training provider and partner of DepEd in the implementation of the Special Program in Foreign Language (SPFL)-French. It will be conducted by the Alliance Française of Manila and Cebu and held via **Zoom** for a total of 200 hours. It will be held every **Saturday** from **July 5 to October 3, 2025**, from 9:00 a.m. to 12:00 noon.
3. Applications are open to teachers from schools intending to offer SPFL-French or teachers who wish to become additional SPFL-French teachers at their schools.
4. Each SDO shall recommend one (1) nominee after evaluation by the SDO Personnel Development Committee (PDC) following the qualifications indicated in Enclosure 1 and 2. The deadline for submission of an e-copy of requirements will be on **May 21, 2025, at 5:00 pm** through the email address **carneapr@deped.gov.ph**.
5. For queries and clarifications, please contact the Human Resource Development Division – National Educators Academy of the Philippines in the Region (HRDD-NEAPR) through Rosita C. Agnasi, OIC-HRDD-NEAPR or Elvernice S. Fanged, Scholarship Focal Person through email address at **car.neapr@deped.gov.ph**.
6. Immediate and widest dissemination of this Memorandum is directed.

ESTELA P. LEON-CARIÑO EdD, CESO III
Regional Director/ Director IV

For the Regional Director:

MAKSIM A. BOTILAS
CAO, ASD
Officer-In-charge

//HRDDNEAPCAR/CA/ASE/frenchlanguage



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DepEd Tayo Cordillera



<https://depedcar.ph>



(Enclosure 1 to RM No. **342.2025**)

GENERAL ELIGIBILITY REQUIREMENTS/CHECKLIST

Name:	
Scholarship Program:	
Sponsoring Agency/Organization:	
Region/SDO:	
Work Station:	

Remarks (✓, ✗, others)	Eligibility	Documentary Requirements
	a. Must be a Filipino citizen.	Updated Personal Data Sheet
	b. Must have obtained a very satisfactory (VS) performance rating for two (2) consecutive years.	Latest rated performance rating with approved IDP
	c. Must present his/her Individual Development Plan (IDP) that is validated by the head of the office.	
	d. Must be holding a permanent item.	Updated Service Record
	f. Must have no master's degree (for those who will apply for a master's degree) and shall have no doctoral degree (for those who will apply for a doctoral degree).	Updated Personal Data Sheet
	g. Must have no current or pending enrollment in other institutions for graduate or postgraduate degree programs (for degree programs).	
	h. Must be willing to sign a Scholarship Contract and commit to its provisions.	(shall be complied after being officially nominated)
	j. Must have no pending administrative, civil, or criminal case, and must have not been found guilty of any violation involving moral turpitude, corruption, or fraud.	Certificate of no pending administrative/legal charges
	k. Educational Attainment	Photocopy of diploma of highest educational attainment
	l. Innovations and implemented programs across governance levels (national/regional/division/school level);	Accomplishment reports
	m. Community and extension services;	Accomplishment reports
	n. Endorsement from the School Head duly approved by the Schools Division Superintendent.	Endorsement (from SH, and SDS)

SCHOLARSHIP CLEARANCE

I. NAME		
II. Position/Designation		
III. Permanent Station		
IV. Has availed any scholarship program	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, fill out sections V-X, as applicable.
V. Scholarship Program	Program Type	Title of the Program
	<input type="checkbox"/> Degree <input type="checkbox"/> Non-Degree	
VI. Scholarship Duration		
VII. Status	<input type="checkbox"/> Completed the course (Submit a copy of Certificate of Completion)	<input type="checkbox"/> Withdrawn from the Course (State the reason below)
VIII. Reason/s for Non-Completion (must be supported by attachments)	<input type="checkbox"/> Resignation <input type="checkbox"/> Transfer <input type="checkbox"/> Retirement <input type="checkbox"/> Others <i>Explain further.</i>	
IX. Service Obligation	No. of Months/Yrs Required	No. of Months/Yrs Completed
X. Reason for Non-Completion (must be supported by attachments)	<input type="checkbox"/> Resignation <input type="checkbox"/> Transfer <input type="checkbox"/> Retirement <input type="checkbox"/> Others <i>Explain further.</i>	
<i>I hereby attest that the information in this form and the supporting documents attached hereto are true and correct</i>		
_____ Name and Signature of the Scholar		_____ Date and Time
<i>This is to certify that the information in this form and the supporting documents attached hereto are true and correct</i>		
_____ Name and Signature of the Recommending Authority (SDO - HRDD)		_____ Date and Time
APPROVED		
_____ Name and Signature of the Recommending Authority (RO-HRDD)		_____ Date and Time