Department of Education National Capital Region DIVISION OF CITY SCHOOLS Valenzuela City

APPLICATION FOR PERMIT TO STUDY

Name of Applicant:	Position:	
Name of School Employed:		
Address: Civil		ıs:
Distance in kms. Between official station to Co	ollege/University:	
(NAME AND LOCATION OF THE COLLEGE/U	UNIVERSITY WHERE THE APPLICA	ANT WISHES TO ENROLL)
Course Applied For:		
	Regular/Saturday/Summer:	
Number of Units Authorized:		
SUBJECT/S	STILL TO BE TAKEN	
Credits or Units Towards: Total Number of Units Previously Earned	BSE/ED d:	M.A. Unit
Number of Units to be earned This Time:		

I HEREBY CERTIFY that I have carefully read BPS No. 17, s. 1960 and all the provisions which I am bound to observe strictly. I understand that the regulation on outside study of teachers are intended primarily to safeguard the health of the teachers, as well as to maintain the efficiency in the service. I also understand if it is the opinion of the Principal, that the study permit adversely affects my efficiency as a teacher, this permission shall be revoked.

Date Submitted:	Signature of Applicant:	

APPROVAL RECOMMENDED:

The undersigned shall require strict compliance by the applicant with all existing rules and regulation regarding permission to study. The applicant is required to submit to this Office a Certified True Copy of the report of training obtained in the course right after the end of the semester.

Principal/Head of School
APPROVED:

WILFREDO E. CABRAL, CESO V Schools Division Superintendent

- 1. Application for the permission to study in three (3) copies must reach the Office of the Superintendent at least two (2) months before the start of the actual classes. THE TEACHER MUST FILE THE REQUEST BEFORE ENROLLING FOR THE FIRST TIME IN ANY SCHOOL/COLLEGE/UNIVERSITY.
- 2. The teacher-applicant must be doing satisfactory work with an efficiency rating of SATISFACTORY or above.
- 3. The permission is given until the applicant completes the curriculum towards a degree. He does not need to file a request for permission every semester unless there is a change in school/college/university where the teacher is enrolled at.
- 4. A certification from the Head of the School/College/University where the teacher is enrolled and the subjects to be pursued should be attached with this request.
- 5. The subjects that the teachers are about to finish and those they have started including those they have already completed and still to be taken should all be certified by the registrar of the school concerned.
- 6. After each semester every teacher granted permission to study should submit to the Principal's Office a Certified True Copy of the report of the rating he/she obtained in the course which he/she took during the semester including the number of units earned. In addition, as soon as he/she finished a specific curriculum towards a degree he/she should submit a complete set of his/her transcript of records and special order to the principal, through his/her immediate superior for validation and verification.
- 7. The maximum load of nine (9) units per semester or summer should be strictly observed. Teachers who are candidates for graduation may be allowed to carry from one (1) to three (3) units more than the nine (9) units authorized provided that other three (3) are the last units these teachers needed to enable them to graduate. No exceptional case will be given where teacher's do not fall under the above state conditions. Violations of this regulation on the study load shall be sufficient ground for revocation of the permission to study or for administrative action.
- 8. The School/College/University in which the teacher contemplates enrolling should be accessible to his/her official station so that he will not be unduly compelled to hurry there in order to arrive at his/her class on time. The teacher should attend to his/her outside study not earlier than (30) minutes after the afternoon session in public school.
- 9. The immediate superior shall be held strictly responsible for any undue delay in the forwarding the application to the Office of the Principal.

NAME AND LOCATION OF THE SCHOOL/COLLEGE/UNIVERSITY WHERE THE APPLICANT WISHES TO ENROLL

CERTIFICATION

To Whom It May Concern:

teacher is seeking admissio	THAT	
Tonowing subjects offered t	his (Semester/Summer)	·
SUBJECTS	DAY OF THE WEEK	HOURS OF THE DAY

REGISTRAR