

Republic of the Philippines
(Republic of the Philippines)
KAGAWALAN NG EDUKASYON AT KULTURA
(DEPARTMENT OF EDUCATION AND CULTURE)
Manila.

May 18, 1976

DEPARTMENT MEMORANDUM
No. 140, s. 1976

REVISED EQUIVALENTS RECORD FORM (REF)

To the: Regional Directors
Schools Superintendents

1. Enclosed with this Department Memorandum is the Revised Equivalents Record Form (REF) to be accomplished by teachers and other personnel whose positions are classified in the Teaching Group. In accomplishing the Form, it is desired that all the data/information called for be indicated correctly.
2. The field is reminded that all REFs should be submitted to this Office for final approval.
3. The revised Form should be disseminated to personnel concerned and its use effected immediately.

(SGE.) JES L. MATEO
Secretary of Education and Culture

Encl.:

As stated

Reference:

NSR General Order No. 203 Dated November 21, 1953

Attachment: 1-2--(D.O. 1-76)

To be indicated in the Perpetual Index
under the following subjects:

TEACHERS
OFFICIALS
TEACHERS

Bureau of the Public Schools
Department of Education and Culture
SAC Region No. _____

Director of Technical Services _____
EMPLOYMENT PROMOTION
(Submit to SAC in five copies)

V. A. C. E. : _____ Date of Birth _____ Sex _____
(Number) (Given Name) (Initial)

Employee No. _____ Authorized Provision Title _____
Last No. _____ P.D. No. _____
Authorized Salary _____

I. Educational Background and Work Experience (Indicate):

Titles, Degrees, or Grades Attained	Name of Institution	Year Began Services	Year Terminated	Part-time	Notes

II. Service Record: ATTACH FULL OFFICIAL EMPLOYMENT RECORD

III. Requirements met:

- 1. Total no. of years teaching: (Public only) _____ Equivalent _____
- 2. Degree to Degree Equivalent: (Degree, Degree) _____ Equivalent _____
- 3. Areas of Experience:
 - a. School type: No. of Institutions _____
 - b. Professional Study: _____
 - c. Teaching Experience:
 - 1. Public Sch. _____
 - 2. Private Sch. _____
 - d. Non-Supervisory Experience:
 - 1. Public Sch. _____
 - 2. Private Sch. _____
 - e. Other (Seminars, Workshops, etc.) _____

IV. TEST EFFECTIVE DATE: _____

Name: _____ Teacher's Signature: _____

V. Division Action:
Classification: _____ Range as: _____ Salary: _____ Schedule: _____
_____ Significant: _____ Range: _____ Salary: _____

RECOMMENDING OFFICER:

APPROVING OFFICER:

(Supervisor of Schools)

(Off. Processing Officer)

V. SAC Region Office Action:

Classification: _____ Range: _____
Date approved/processed: _____ Total added to Range _____
(for future reference)

Regional Director:

Regional: