

Education Service Contracting

Application Form

ESC Form 1

MPU-FO-020

ABOUT ME				
Learner Reference Number (LRN)		2x2 ID Photo		
Last Name				
First Name				
Middle Name				
Suffix (i.e. Jr., III)	Date of Birth			
Place of Birth				
Nationality <input type="checkbox"/> Filipino <input type="checkbox"/> Others (Specify)	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female			
ADDRESS AND CONTACT DETAILS				
Street Address		Barangay/District		
Municipality/City		Province		
Zip Code	Mobile/Landline No.	Email Address		
ABOUT MY FAMILY				
First Name	Middle Name	Last Name	Relationship	
1.				
2.				
3.				
4.				
5.				
6.				
Note: Use back page if more than six family members		Total No. of Siblings		
Does your family own any of the following		Motorcycle/Pedicab <input type="checkbox"/> Yes <input type="checkbox"/> No	Car, Van, Pick-up or Truck <input type="checkbox"/> Yes <input type="checkbox"/> No	Land or Farm <input type="checkbox"/> Yes <input type="checkbox"/> No
Home details		<input type="checkbox"/> Owned <input type="checkbox"/> Rented <input type="checkbox"/> Company Provided/Living with Relatives		No of Bedrooms
SUPPORT FOR COST OF SCHOOLING				
	Last Name	First Name	Sources of Income	Gross Monthly Income
Father			<input type="checkbox"/> Locally Employed <input type="checkbox"/> Employed Abroad <input type="checkbox"/> Self-employed-Professional <input type="checkbox"/> Self-employed-Business <input type="checkbox"/> Retired/Unemployed <input type="checkbox"/> Others: _____	<input type="checkbox"/> Php 0-5,000 <input type="checkbox"/> Php 5,001-10,000 <input type="checkbox"/> Php 10,001-15,000 <input type="checkbox"/> Php 15,001-20,000 <input type="checkbox"/> Php 20,001-25,000 <input type="checkbox"/> Php 25,001-50,000 <input type="checkbox"/> More than Php50,000

Mother			<input type="checkbox"/> Locally Employed <input type="checkbox"/> Employed Abroad <input type="checkbox"/> Self-employed-Professional <input type="checkbox"/> Self-employed-Business <input type="checkbox"/> Retired/Unemployed <input type="checkbox"/> Others: _____	<input type="checkbox"/> Php 0-5,000 <input type="checkbox"/> Php 5,001-10,000 <input type="checkbox"/> Php 10,001-15,000 <input type="checkbox"/> Php 15,001-20,000 <input type="checkbox"/> Php 20,001-25,000 <input type="checkbox"/> Php 25,001-50,000 <input type="checkbox"/> More than Php50,000
Guardian			<input type="checkbox"/> Locally Employed <input type="checkbox"/> Employed Abroad <input type="checkbox"/> Self-employed-Professional <input type="checkbox"/> Self-employed-Business <input type="checkbox"/> Retired/Unemployed <input type="checkbox"/> Others: _____	<input type="checkbox"/> Php 0-5,000 <input type="checkbox"/> Php 5,001-10,000 <input type="checkbox"/> Php 10,001-15,000 <input type="checkbox"/> Php 15,001-20,000 <input type="checkbox"/> Php 20,001-25,000 <input type="checkbox"/> Php 25,001-50,000 <input type="checkbox"/> More than Php50,000
Person Helping Send the Child to School (If applicable)			<input type="checkbox"/> Locally Employed <input type="checkbox"/> Employed Abroad <input type="checkbox"/> Self-employed-Professional <input type="checkbox"/> Self-employed-Business <input type="checkbox"/> Retired/Unemployed <input type="checkbox"/> Others: _____	<input type="checkbox"/> Php 0-5,000 <input type="checkbox"/> Php 5,001-10,000 <input type="checkbox"/> Php 10,001-15,000 <input type="checkbox"/> Php 15,001-20,000 <input type="checkbox"/> Php 20,001-25,000 <input type="checkbox"/> Php 25,001-50,000 <input type="checkbox"/> More than Php50,000

*For employees, it refers to the gross monthly salaries and wages before taxes and other deductions. It includes basic pay, overtime pay, commissions, tips, allowances and one-twelfth of annual bonuses. For all others, it refers to the average monthly earnings from their business, trade, profession, investments and/or pensions.

ABOUT MY ELEMENTARY SCHOOL

Name of Elementary School		School Type <input type="checkbox"/> Public <input type="checkbox"/> Private
Province	City/Municipality	Barangay/District

*If the **Elementary School is Private**, please indicate the school fees charged by the Elementary School.*

Level	Tuition (Php)	Other (Php)	Miscellaneous (Php)
Grade 6			

ATTESTATION

Documents attached to this application	<input type="checkbox"/> Recent Identical 2x2 ID photo (2 copies) <input type="checkbox"/> PSA Certified Birth Certificate <input type="checkbox"/> Photocopy of Grade 6 Report Card <input type="checkbox"/> Latest Income Tax Return for the previous year or Certificate of Tax Exemption or Municipal Certification of Unemployment of Parents/Legal Guardian
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I certify that my answers are true and correct to the best of my knowledge.

I am aware that the information supplied in this form will be retained by PEAC on a database and will be processed in compliance with the Data Protection Act of 2012.

I consent that the information herein may be used for reports both internally and to the Department of Education.

Signature of Student over printed name	Date
Signature of Parent/Guardian over printed name	Date

ESC Grantee Enrolment Contract

We, the **Undersigned Parties**, do hereby bind ourselves to the following terms of this Contract:

On the Part of the Student:

That I _____ agree to study at _____
under the "Educational Service Contracting" program, provided that I meet all requirements for continued participation in the ESC program.

That I will abide by the rules and regulations of abovementioned school;

That I will comply with the school requirements and try to finish the course for each school year, applying myself with seriousness and dedication; and

That I will consult the school authorities on problems relative to the fulfillment of the terms of this contract.

On the Part of the Parent/Guardian:

That I _____, parent/guardian of aforesaid student, fully agree to enroll my child/ward at the abovementioned school under the "Educational Service Contracting" program;

That I will abide by the rules of the aforesaid school;

That I will help my child/ward to finish the course for every year level during the period specified

That I will help in the best way I can in -

- a. preventing truancy and/or absenteeism of my child/ward;
- b. making my child/ward attend seriously to his/her school work; and
- c. attending/participating in school activities that need my presence.

That since the ESC program sets for every school year a maximum amount as subsidy for student's tuition and other fees, I agree to pay to the school any excess of the fees charged which is not covered by the ESC subsidy; and

That in case of problems relative to the fulfillment of this contract, I will consult the school authorities concerned or the Division Project Committee.

On the Part of the School:

That the _____ will give the same attention and training to contract students under the ESC program as that given to non-contract students in the school;

That in case of problems relative to this contract, the parents/guardians will always be consulted.

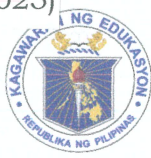
Signed at _____ on _____.

Student

Parent/Guardian

School Head

Note: Signature over printed name.



Republic of the Philippines
Department of Education
GOVERNMENT ASSISTANCE AND SUBSIDIES SERVICE

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By affixing your name and signature below, you confirm that you have read and understood DepEd's Data Privacy Notice, and you provide your full consent for the publication of your name as a GAS beneficiary.

_____ *Signature over printed name* _____ *Date*

School: _____

Relationship with the learner (if learner is minor): _____

Complete Name of Learner: _____



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