

Republic of the Philippines  
**Department of Education**  
REGION II - CAGAYAN VALLEY  
SCHOOLS DIVISION OF BATANES

20 January 2025

**DIVISION MEMORANDUM**

No. 023, s. 2025

**GUIDELINES FOR THE CONDUCT OF THE SUPREME ELEMENTARY LEARNER GOVERNMENT (SELG) AND SUPREME SECONDARY LEARNER GOVERNMENT (SSLG) ELECTIONS FOR SCHOOL YEAR 2025-2026**

To: Assistant Schools Division Superintendent  
Chief Education Supervisors  
All Public and Private Elementary and Secondary School Heads  
All others concerned

1. In accordance with **DepEd Order No. 31, s. 2022**, titled *Child Rights Policy: Adopting the Right-Based Education (RBE) Framework in Basic Philippine*, this Office issues the **Guidelines for the Conduct of the Supreme Elementary Learner Government (SELG) and Supreme Secondary Learner Government (SSLG) Elections for the School Year 2025-2026**.
2. In compliance therewith, this Office through the School Governance and Operations Division - Youth Formation Program Unit issues the Division-based indicative schedule of activities which shall be followed in the conduct of SELG/SSLG elections to wit:

<b>Suggested Date</b>	<b>Activity</b>
January 27-31, 2025	Organization of LG COMEA
February 3-4, 2025	Filing of Candidacy
February 5-6, 2025	Evaluation of Election Application Form
February 7, 2025	Announcement of the Official List of Candidates
	Campaign Period <ul style="list-style-type: none"><li>➤ Presidential Election Forum</li><li>➤ Campus – Wide Presidential and Vice – Presidential Debates</li></ul>
February 17-21, 2025	School Elections
February 24, 2025	Proclamation of Winner/Oath-Taking
March 10, 2025	Division Federation Election
March 17-21, 2025	Regional Federation Election
TBA	National Federation Election
TBD	School Club / Organization Election

3. The duly accomplished and signed Registry of Elected/Appointed Officers (Enclosure 9) shall be sent on a soft copy to the Division YFP focal person through email at [schneiderelinore.acebes@deped.gov.ph](mailto:schneiderelinore.acebes@deped.gov.ph) not later than **February 26, 2025**.



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Doc Code:	<b>FM-ORD-005</b>	Rev:	<b>00</b>
As of:	<b>Jul 2, 2018</b>	Page:	<b>1</b>



4. The Division Learner Formation Coordinator (DLFC) shall conduct onsite and offsite monitoring and evaluation of the conduct of the SELG and SSLG campaign and elections.
5. Enclosed herewith are the standardized materials essential for the upcoming Learner Government Program elections, to be utilized throughout the phases of the election process – before, during, and after – ensuring the smooth and fair conduct of election proceedings.
6. All expenses incurred relative to the conduct of all activities related to school-based SELG and SSLG elections for SY 2025-2026 shall be charged to School Maintenance and Other Operating Expenses (MOOE), local funds or other available funds while the Division federation elections for SELG/SSLG shall be charged against the Program Support Fund for the Youth Formation Program subject to the usual accounting and auditing rules and regulations.
7. Immediate and wide dissemination of this Memorandum to all concerned is desired.

**ALFREDO B. GUMARU JR. EdD, CESO V**  
Schools Division Superintendent

Encl: As stated

References: As stated

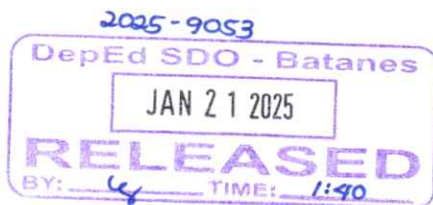
DO no. 31, s. 2022

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

Elections

Students

SGOD/myn/seda



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# ELECTION APPLICATION FORM

The Learner Government Program embodies the ideals, principles, and practices of participatory democracy. It represents and steers the learners towards the fulfillment of its goal by promoting their rights and welfare. As a learner government leader, this Election Application Form is a statement of your best knowledge and understanding in a position you are applying for.

Place your  
2X2 Picture Here

**Instruction:** Please supply the information requested in the space provided.

## I. PROFILE

**Learner's Name:** \_\_\_\_\_  
(Surname, Given Name, Middle Name, & Extension Name e.g., Jr., I, II...)

**Grade Level:** \_\_\_\_\_

**Elective Position Applied:** \_\_\_\_\_

**Party Affiliation (if applicable):** \_\_\_\_\_

**Gender:** \_\_\_\_\_ **Age:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_ **Mobile No.:** \_\_\_\_\_ **Landline:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_

## II. LEARNER'S ACADEMIC AND BEHAVIORAL STATUS

1. Has no failing grades in all subject areas?		<input type="checkbox"/>	<b>Yes</b>	<input type="checkbox"/>	<b>No</b>
Attested by:	_____	_____			
	Class Adviser Name & Signature	Date			
2. Is of good moral character?		<input type="checkbox"/>	<b>Yes</b>	<input type="checkbox"/>	<b>No</b>
Attested by:	_____	_____			
	EsP/Guidance Coordinator Name & Signature	Date			

*Kindly attach a photocopy of your School Form 9 [Learner's Progress Report Card and Certificate of Good Moral.*

## III. PARENTAL CONSENT

I, \_\_\_\_\_ as a parent/ guardian of \_\_\_\_\_ will support his/her commitment to the Learner Government to the best of my ability.

I am allowing him/her to participate in the programs, projects, and activities of the Supreme Learner Government.

I agree and understand the commitment of my son/daughter and will support his/her endeavor to the Supreme Learner Government.

\_\_\_\_\_  
Name and Signature of the Parent/Guardian

\_\_\_\_\_  
Contact Number

## IV. CERTIFICATION

I am filing this Election Application Form of the Supreme Learner Government for the school year \_\_\_\_\_.

I hereby certify that the facts stated herein are true and correct to the best of my knowledge.

\_\_\_\_\_  
Signature of Candidate over Printed Name

Verified by: \_\_\_\_\_

Approved by: \_\_\_\_\_

010325041

## INTRODUCTORY PROFILE FOR ELEMENTARY LEVEL

**DISCLAIMER:** This form, which contains the introductory profile of the learner shall be utilized by Learner Government COMEA for election purposes in the \_\_\_\_\_ (Name of the Learner Government). This also informs the concerned learner that this form shall be published, posted, or disseminated in any form or format, whichever is deemed appropriate. By signing this form, the concerned learner gives his/her consent to utilize all information herein by the LG COMEA.

The following statements serve as your profile on showing your interest and uniqueness that allow you to share your clear understanding about what you can do as part of the Learner Government.

I \_\_\_\_\_ from \_\_\_\_\_ running  
(Surname, Given Name, Middle Initial) (Grade Level and Section)  
 for \_\_\_\_\_  
(Position)

**Instruction:** Complete the following statements.

1. My hobby/hobbies  
is/are \_\_\_\_\_

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2. My ambition/s is/are \_\_\_\_\_

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3. As a learner, I can develop a learner-friendly and motivating environment by \_\_\_\_\_

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## INTRODUCTORY PROFILE FOR SECONDARY LEVEL

**DISCLAIMER:** This form, which contains the introductory profile of the learner shall be utilized by Learner Government COMEA for election purposes in the \_\_\_\_\_ (Name of the Learner Government). This also informs the concerned learner that this form shall be published, posted, or disseminated in any form or format, whichever is deemed appropriate. By signing this form, the concerned learner gives his/her consent to utilize all information herein by the LG COMEA.

The following statements serve as your profile on showing your interest and uniqueness that allow you to share your clear understanding about what you can do as part of the Learner Government.

I \_\_\_\_\_ from \_\_\_\_\_ running  
(Surname, Given Name, Middle Initial) (Grade Level and Section)  
for \_\_\_\_\_  
(Position)

### **General Guide Questions for All Candidates**

Instruction: Answer the following questions.

#### ***Personal Leadership***

1. What qualities do you possess as an aspiring learner leader?

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#### ***Organizational Leadership***

2. Check (/) the organizational skill/s that are applicable to you as an aspiring leader and why.

Motivation	Problem Solving	Values-Oriented
Communication	Goal-Oriented	Service-Oriented

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#### ***Public Leadership***

3. What is your vision of the Learner Government in 3 years' time?

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**SCREENING FORM [Election]***(Note: This Screening Form shall be accomplished by the Screening and Validation Committee.)***Name of Learner:** \_\_\_\_\_**Grade Level & Section:** \_\_\_\_\_**Position:** \_\_\_\_\_**Directions:** Please check the appropriate box to determine the qualifications of aspiring learner leaders for Learner Government Elections.

Description			REMARKS
	Yes	No	
<b>Required Documents</b>			
1. Election Application Form			
2. Introductory Profile			
3. Photocopy of School Form 9 [Learner's Progress Report Card]			
4. Certificate of Good Moral			
<b>Qualifications</b>			
1. Is the learner enrolled in the current school year?			
2. Has no failing grades in all subject areas?			
3. Is of good moral character?			
4. Is the grade level of the aspiring candidate appropriate to the requirement of the desired elective position? (refer to Enc. 2)			
<p>With all the required documents submitted by the aspiring candidate, the Learner Government COMEA hereby declares him/her <b>_____ QUALIFIED _____ NOT QUALIFIED</b> to run for the election.</p>			

Verified by:

\_\_\_\_\_  
**Commissioner on Screening and Validation****Date:** \_\_\_\_\_



**SCREENING FORM [Appointment]***(Note: This Screening Form shall be accomplished by the Screening and Validation Committee.)***Name of Learner:** \_\_\_\_\_**Grade Level & Section:** \_\_\_\_\_**Position:** \_\_\_\_\_**Directions:** Please check the appropriate box to determine the qualifications of aspiring learner leaders for Learner Government Appointment.

Description			REMARKS
	Yes	No	
<b>Required Documents</b>			
1. Nomination Form			
2. Communication for Nominee *Nomination Reply Slip			
3. Introductory Profile			
4. Photocopy of School Form 9 [Learner's Progress Report Card]			
5. Certificate of Good Moral			
<b>Qualifications</b>			
1. Is the learner enrolled in the current school year?			
2. Has no failing grades in all subject areas?			
3. Is of good moral character?			
4. Is the grade level of the aspiring candidate appropriate to the requirement of the desired elective position? (refer to Enc. 2)			
<p>With all the required documents submitted by the possible appointee, the Learner Government COMEA hereby declares him/her _____ <b>QUALIFIED</b> _____ <b>NOT QUALIFIED</b> to be appointed.</p>			

Verified by:

\_\_\_\_\_  
*Commissioner on Screening and Validation***Date:** \_\_\_\_\_

**SAMPLE BALLOT**

General Instructions: Shade the circle beside the name of the candidate of your choice. Vote wisely!

President

- ☐ Surname, First Name M.I. (Candidate A)  
☐ Surname, First Name M. I. (Candidate B)

Vice President

- ☐ Surname, First Name M.I. (Candidate C)  
☐ Surname, First Name M. I. (Candidate D)

Secretary

- ☐ Surname, First Name M.I. (Candidate E)  
☐ Surname, First Name M. I. (Candidate F)

Treasurer

- ☐ Surname, First Name M.I. (Candidate G)  
☐ Surname, First Name M. I. (Candidate H)

Auditor

- ☐ Surname, First Name M.I. (Candidate I)  
☐ Surname, First Name M. I. (Candidate J)

Public Information Officer

- ☐ Surname, First Name M.I. (Candidate K)  
☐ Surname, First Name M. I. (Candidate L)

Protocol Officer

- ☐ Surname, First Name M.I. (Candidate M)  
☐ Surname, First Name M. I. (Candidate N)

Grade ( ) Representative

- ☐ Surname, First Name M.I. (Candidate O)  
☐ Surname, First Name M. I. (Candidate P)

Grade ( ) Representative

- ☐ Surname, First Name M.I. (Candidate Q)  
☐ Surname, First Name M. I. (Candidate R)

cut here

Name: \_\_\_\_\_

Grade and Section: \_\_\_\_\_

Signature: \_\_\_\_\_

Right Thumbmark: \_\_\_\_\_

**SAMPLE BALLOT**

General Instructions: Shade the circle beside the name of the candidate of your choice. Vote wisely!

President

- ☐ Surname, First Name M.I. (Candidate A)  
☐ Surname, First Name M. I. (Candidate B)

Vice President

- ☐ Surname, First Name M.I. (Candidate C)  
☐ Surname, First Name M. I. (Candidate D)

Secretary

- ☐ Surname, First Name M.I. (Candidate E)  
☐ Surname, First Name M. I. (Candidate F)

Treasurer

- ☐ Surname, First Name M.I. (Candidate G)  
☐ Surname, First Name M. I. (Candidate H)

Auditor

- ☐ Surname, First Name M.I. (Candidate I)  
☐ Surname, First Name M. I. (Candidate J)

Public Information Officer

- ☐ Surname, First Name M.I. (Candidate K)  
☐ Surname, First Name M. I. (Candidate L)

Protocol Officer

- ☐ Surname, First Name M.I. (Candidate M)  
☐ Surname, First Name M. I. (Candidate N)

Grade ( ) Representative

- ☐ Surname, First Name M.I. (Candidate O)  
☐ Surname, First Name M. I. (Candidate P)

Grade ( ) Representative

- ☐ Surname, First Name M.I. (Candidate U)  
☐ Surname, First Name M. I. (Candidate V)

cut here

Name: \_\_\_\_\_

Grade and Section: \_\_\_\_\_

Signature: \_\_\_\_\_

Right Thumbmark: \_\_\_\_\_

Enclosure No. 7: Election Tabulation Form

ELECTION TABULATION FORM

Level of Learner Government: Elementary ☐ Secondary ☐  
 Mode of Election: Manual ☐ Digital ☐ Hybrid ☐

Tally of Votes per Position: (Note: Add rows if necessary.)

Name	Tally	Total	Rank
<b>President</b>			
<b>Vice President</b>			
<b>Secretary</b>			
<b>Treasurer</b>			
<b>Auditor</b>			
<b>Public Information Officer</b>			
<b>Protocol Officer</b>			
<b>Grade __ Representative</b>			
<b>Grade __ Representative</b>			

Enclosure No. 7: Election Tabulation Form

Grade	Representative			
Grade	Representative			
Grade	Representative			
Grade	Representative			

Prepared by:

Signature over printed name of  
Electoral Board Committee Member

Attested by:

Signature over printed name of  
Commissioner on Electoral Board



**ELECTION CANVASS FORM**

Level of Learner Government: ☐ Elementary ☐ Secondary ☐

Name of Organization: \_\_\_\_\_

Mode of Election: Manual ☐ Digital ☐ Hybrid ☐

Tally of Votes per Position: (Note: Add rows if necessary.)

Name	Tally	Total	Rank
<b>President</b>			
<b>Vice President</b>			
<b>Secretary</b>			
<b>Treasurer</b>			
<b>Auditor</b>			
<b>Public Information Officer</b>			
<b>Protocol Officer</b>			
<b>Grade _____ Representative (if applicable)</b>			

Enclosure No. 8: Election Canvass Form

Grade	Representative (if applicable)				
Grade	Representative (if applicable)				
Grade	Representative (if applicable)				
Grade	Representative (if applicable)				
Grade	Representative (if applicable)				

Prepared by:

Signature over printed name of  
Screening and Validation Committee

Attested by:

Signature over printed name of  
Chief Commissioner, LG COMEA



Enclosure No.9: Registry of Elected Officers

REGISTRY OF ELECTED OFFICERS

Level of Learner Government: \_\_\_\_\_ Elementary ☐ Secondary ☐  
 Name of Government: \_\_\_\_\_ School ID: \_\_\_\_\_  
 Name of School: \_\_\_\_\_

Position	Name	Gender	Grade Level
President			
Vice President			
Secretary			
Treasurer			
Auditor			
Public Information Officer			
Protocol Officer			
Grade ___ Representative (If applicable)			
Grade ___ Representative (If applicable)			
Grade ___ Representative (If applicable)			
Grade ___ Representative (If applicable)			
Grade ___ Representative (If applicable)			
Grade ___ Representative (If applicable)			

(Note: For representatives, add rows if necessary.)

Prepared by: \_\_\_\_\_

Signature over printed name of  
Commissioner on Screening and Validation

Attested by: \_\_\_\_\_

Noted by: \_\_\_\_\_

Signature over printed name of  
Commissioner on Electoral Board

Signature over printed name of  
Chief Commissioner



Republic of the Philippines  
Department of Education

Region \_\_\_\_\_

Division \_\_\_\_\_

Name of School/District \_\_\_\_\_

## Oath of Office

I \_\_\_\_\_ of \_\_\_\_\_,  
(State your Full Name) (Name of School)  
having been elected/appointed as \_\_\_\_\_ of  
(your current position)

\_\_\_\_\_, do hereby solemnly swear that I will faithfully  
(Name of Organization)  
discharge, to the best of my ability, the duties of my present position; that I have clearly  
understood, and I will abide by, the guidelines governing this organization and of the  
issuances by the Department of Education; and that I impose this obligation upon  
myself voluntarily, without mental reservation or purpose of evasion.

So, help me God.

\_\_\_\_\_  
Signature Over Printed Name

\_\_\_\_\_  
Administering Officer



Republic of the Philippines  
**Department of Education**  
Region XI  
Schools Division Office of Davao del Sur

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**APPOINTMENT FORM**

Mr./ Ms.: \_\_\_\_\_

After a series of deliberation, you are hereby appointed as \_\_\_\_\_  
of the Learner Government of \_\_\_\_\_ for School Year  
(Name of Organization)  
\_\_\_\_\_ in \_\_\_\_\_  
(Name of School)

This appointment shall take effect immediately on the date of signing by the appointing authority.

Very truly yours,

NAME OF COMMISSIONER  
Learner Government COMEA  
Date of Signing: \_\_\_\_\_

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**CERTIFICATION**

This is to certify that the appointee has undergone a series of screening, validation, and deliberation processes as facilitated by the LG COMEA in pursuant to the Learner Government Election and Appointment Code (LGEAC).

Moreover, all requirements and supporting documents submitted by the appointee are valid and compliant to the standards and qualifications set by the LG COMEA.

NAME OF COMMISSIONER  
Chief Commissioner  
Learner Government COMEA  
Date: \_\_\_\_\_

010325041

