



1 June 2020

DR. WILSON O. GARCIA

Director
National Institute of Physics
College of Science
University of the Philippines
Diliman, Quezon City

Dear **Dr. Garcia**:

This refers to your proposal for the inclusion of MA Physics Program at the University of the Philippines – Diliman National Institute of Physics (NIP) in the List of Graduate Degree Programs under the Capacity Building Program in Science and Mathematics Education implemented by the DOST-SEI in partnership with the National Consortium in Graduate Science and Mathematics Education (NCGSME).

We wish to inform you that your proposal is hereby approved to commence by the First Semester of AY 2020-2021. Attached please find is the application form and brochure for dissemination to qualified applicants.

Kindly endorse to us the list of potential qualifiers using the attached template.

Thank you.

Very truly yours,

JOSETE T. BIYO, Ph.D.
Director, SEI

**If employed by the Department of Education (DepEd), please accomplish Form 2A.*
a. Employment History (if previously employed)

NAME OF INSTITUTION/COMPANY	DATE OF EMPLOYMENT	POSITION

*Please attach copy of Service Records or Certificate/s of Employment

III. CAREER PLANS (Write in the attached sheet)

- A. Discuss your proposed topic/research area of interest between 250-500 words (Annex A)
- B. Discuss your future plans after graduation in not more than 250 words (Annex B)

IV. DOST-SEI SCHOLARSHIP PROGRAM INFORMATION

13. If you have previously availed of any of the DOST-SEI scholarship program, please indicate below:

Program (put a check)	Year of Scholarship Award
_____ RA 7687	_____
_____ Merit	_____
_____ Project 8102 Ed/9001 Ed	_____
_____ JLSS (JLAP)	_____
_____ Faculty Development Program for Teacher Education Institutions (TEIs)	_____
_____ ASTHRDP-Science Education	_____
_____ NCGSME	_____

V. EDUCATIONAL BACKGROUND

LEVEL	SCHOOL	DEGREE EARNED	YEAR GRADUATED	GENERAL WEIGHTED AVERAGE (GWA)	HONORS RECEIVED
Baccalaureate					
Master's					
Title of Thesis					

*Please attach Certified True Copy of Transcript of Records.

VI. SCHOLARSHIP INTENTION

14. Applying for which type of Graduate Scholarship Program?

- Master's
- PhD
- Thesis Grant
- Dissertation Grant

15. Field of Specialization: _____ (Refer to the brochure and specify)

16. University you intend to enroll (You are advised to seek admission at the university where you intend to enroll):

- Ateneo de Manila University
- Bicol University
- Central Luzon State University
- Cebu Normal University
- De La Salle University
- Leyte Normal University
- Mariano Marcos State University
- MSU-IIT
- MSU-Marawi
- Philippine Normal University
- Saint Mary's University
- University of San Carlos
- UP Open University
- UP College of Education
- Western Mindanao State University
- West Visayas State University

17. Have you been admitted to the Graduate School at any of the identified universities?

Yes No If Yes, when? _____

18a. Approved Thesis/Dissertation Topic (for Thesis/Dissertation Grant applicants)

18b. Proposed Thesis/Dissertation Topic

- The topic will be presented to the research adviser for proposal defense and final approval of the panel to determine and recommend an abling mechanism for the student to complete the degree program on time. The research proposal has to meet the priority thrusts identified in the DOST National Science and Technology Plan (NSTP).

VII. RESEARCH INVOLVEMENT (last three years)

Use additional sheet if necessary

AREA AND TITLE OF RESEARCH	LOCATION/DURATION	FUND SOURCE	NATURE OF INVOLVEMENT

VIII. PUBLICATIONS

Use additional sheet if necessary

TITLE OF ARTICLE/PUBLICATION	PLACE/YEAR OF PUBLICATION	NATURE OF INVOLVEMENT

IX. AWARDS AND RECOGNITION RECEIVED

TITLE OF AWARD	AWARD GIVING BODY	YEAR OF AWARD

I hereby certify to the truthfulness and completeness of the information provided. Any misinformation or withholding of information will automatically disqualify me from the program, Capacity Building Program in Science and Mathematics Education. I am willing to refund all the financial benefits received plus appropriate interest if such misinformation is discovered.

Signature over Printed Name of Applicant

Date

Form 2 A (For employees of the Department of Education)

CERTIFICATE OF DEPED EMPLOYMENT, AND PERMIT TO STUDY

This is to certify that Ms/Mr. _____, an applicant for CBPSME scholarship program has a permanent employment status under the **Department of Education**. He/she is allowed to study full-time for a period of 2/3 years, and is permitted to take a leave of absence and shall be released from institutional responsibilities for the entire duration of the scholarship program.

Principal

Schools Division Superintendent
Division of _____

Regional Director
DepEd Regional Office # _____

Form 2 B (For employed non DepEd applicants)

CERTIFICATE OF EMPLOYMENT, AND PERMIT TO STUDY

This is to certify that Ms./Mr. _____, an applicant for CBPSME scholarship program has a permanent employment status under the _____.
Name of School/Institution

He/she is allowed to study full-time for a period of 2/3 years, and is permitted to take a leave of absence and shall be released from institutional responsibilities for the entire duration of the scholarship program.

Principal

Form 3

MEDICAL CERTIFICATE

_____ Date

TO WHOM IT MAY CONCERN:

This is to certify that I have examined _____ and found
(Name of Applicant)
him/her to be physically and mentally fit to undergo graduate studies.

This certification is issued in connection with his/her application for scholarship under master's/doctoral program of the Capacity Building Program in Science and Mathematics Education.

_____ Health Agency

_____ Name (Print) and Signature of Licensed Physician

_____ Address

_____ PRC License No.

CHECKLIST OF DOCUMENTS TO BE SUBMITTED

	Accomplished Information Sheet (Form 1)
	Certified Copy of Transcript of Records (TOR)
	Recommendation letter from 2 former professors
	Certificate of DepEd employment with a permanent employment status, permitted to take a leave of absence and commitment for full release from institutional responsibilities for the entire duration of the program (Form 2A)
	Certificate of employment with a permanent employment status, permitted to take a leave of absence and commitment for full release from institutional responsibilities for the entire duration of the program, if employed (Form 2B)
	Notice of Admission
	Commitment to complete the degree
	One (1) copy of 2 x 2 recent pictures
	Birth Certificate (Photocopy)
	Medical Certificate (Form 3)

TERMS OF THE SCHOLARSHIP AWARD

An awardee shall:

- enroll in the required academic load per semester and study full-time/part-time in any of the identified training institutions;
- maintain a grade point average/general weighted average required by the Graduate School of the university and comply with the university's academic requirements to remain in the scholarship program;
- comply with the terms and conditions of the Scholarship Contract to be entered into among himself/herself, the DOST-SEI, and the Training Institution;
- render service in the Philippines upon completion of the degree along the field of specialization equivalent to the length of time the scholarship is enjoyed;
- receive the remaining stipends to be released as incentive if the degree program is completed earlier than the prescribed period of study;
- refund the scholarship grant with 12% interest for non-completion of the program within the prescribed period of study and/or failure to comply with the service obligation.

SELECTION OF AWARDEES

1. Member-university screens and evaluates the accomplished application form and other documentary requirements of the applicant.
2. University endorses the list of potential qualifiers to SEI.

Additional Process for DepEd Teacher Applicants

- DOST-SEI endorses to DepEd the list of names of potential qualifiers from DepEd who are teaching and non-teaching personnel with seven (7) or more years in service.
- DepEd issues potential qualifier Certification re-Permit to go on Leave with Compensation.
- DepEd endorses to DOST-SEI the list of qualified DepEd teachers and non-teaching personnel for final approval of the DOST Secretary.
- 3. Upon approval of the DOST Secretary, the list of awardees is final and unappealable.
- 4. DOST-SEI, through the Consortium Project Directors, sends the notice of award to the awardees.

Joseette S. Binyo
JOSETTE T. BNYO

Director



SCIENCE EDUCATION INSTITUTE
Department of Science and Technology/
Science Heritage Building, DOST Compound, Bicutan, Taguig City
Phone Nos.: 837-1333/839-0083
Website: www.sei.dost.gov.ph

Where to Obtain and File Application Forms

NCGSME

1. **ADMU**
Dr. Evangeline P. Bautista
Project Director
School of Science and Eng'g,
Loyola Heights, Quezon City
Contact No.: 426-5985
426-6001 loc 5603
ebautilista@ateneo.edu
2. **BicolU**
Dr. Lorna M. Mina
Project Director
College of Education
Legazpi City
Contact No.: 09177071417
lomsnm@yahoo.com
3. **CLSU**
Dr. Eden S. David
Project Director
College of Arts and Sciences
Science City of Muñoz,
Nueva Ecija
Contact No.: 940-8310
aus_davidddd@yahoo.com
4. **CNU**
Dr. Irene C. Abad
Project Director
College of Teacher Education
Cebu City, Cebu
Contact No.: 09052159530
614r231886@gmail.com
5. **DLSU**
Dr. Lydia S. Roleda
Project Director
Science Education Department
Tarl Avenue, Manila
Contact No.: 526-5916
cbpsme@dlsu.edu.ph
6. **LNLU**
Dr. Ma. Rochin E. Tenasas
Project Director
Office of the Graduate School
Tadoban City, Leyte
Contact No.: 09177051150
ma.rochintenasas@gmail.com
7. **MMSU**
Dr. Aris Reynold V. Caligal
Project Director
College of Teacher Education
Laoag City, Ilocos Norte
Contact No.: 870-7964
arvcaligal@yahoo.com
8. **MSU-IT**
Prof. Monerra Salic-Hanrulla
Project Director
College of Education
Iligan City, Lanao del Norte
Contact No.: 221-4050 to 55
ced.asme.edu.ph
monerra.salic@msuilit.edu.ph
9. **MSU-Marawi**
Dr. Bartolome L. Cagas
Project Director
Institute of Science Education
Marawi City, Lanao del Sur
bcagas2000@yahoo.com
10. **PNU**
Dr. Crist John M. Pastor
Project Director
National Center for Teacher
Education
Tarl Avenue, Manila
Contact No.: 317-1766 loc 538
pastor.cjm@pnu.edu.ph
11. **SMU**
Dr. Melanie G. Gurat
Project Director
School of Graduate Studies
Bayombong, Nueva Vizcaya
Contact No.: 09359660062
melanie.gurat@yahoo.com
12. **UPCED**
Dr. Ma. Nympha B. Joaquin
Project Coordinator
UP College of Education
UP Diliman, Quezon City
(63) 981-8500 loc 2811
mbyjoaquin@up.edu.ph
13. **UP Open University**
Dr. Ricardo T. Bagarinao
Project Director
Faculty of Education
UP Open University
Los Baños, Laguna
Contact No.: 536-6009
ricardo.bagarinao@upou.edu.ph
14. **USC**
Dr. Nelson A. Rosaroso
Project Director
College of Education
Cebu City
Contact No.: 230-0100 loc. 146
nelson_rosaroso@yahoo.com
15. **WMSU**
Dr. Arcefil A. Lim
Project Director
College of Science and
Mathematics
Zamboanga City
Contact No.: 991-7979
lim_arcefil@yahoo.com
16. **WSU**
Dr. Elvira L. Arellano
Project Director
College of Education
Iloilo City
Contact No.: 320-0877 loc 1810
elvir_e_2001@yahoo.com

**CAPACITY
BUILDING
PROGRAM IN
SCIENCE AND
MATHEMATICS
EDUCATION
(CBPSME)**

2020

**BEAN S&T
SCHOLAR
FOR THE
NATION!**



SCIENCE EDUCATION INSTITUTE
Department of Science and Technology

SCIENCE EDUCATION INSTITUTE
CAPACITY BUILDING PROGRAM IN SCIENCE AND MATHEMATICS EDUCATION
REGISTRY OF POTENTIAL QUALIFIERS

NO.	LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	STREET	VILLAGE	TOWN	PROVINCE	ZIP CODE	DISTRICT	REGION	EMAIL ADDRESS	BDAY	CONTACT NO.	GENDER	COURSE COMPLETED (BS OR MS COURSE)	UNIVERSITY GRADUATED (BS OR MS COURSE)	ENTRY (NEW OR LATERAL)	LEVEL (MS, PHD, THESIS OR DISSERTATION)	INTENDED MASTER'S OR DOCTORAL DEGREE	UNIVERSITY	THESIS/DISSERTATION TITLE (for Thesis/ Dissertation Grantee)	REMARKS	
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Prepared by: _____

Endorsed by: _____

Name and Signature of Project Staff _____

Name and Signature of Project Leader _____