



**REGIONAL MEMORANDUM**

No. 41, s. 2017



**TO :** All Schools Division Superintendents  
Assistant Schools Division Superintendents  
Heads of Public Elementary and Secondary Schools

**FROM :**  **RAMON FIEL G. ABCEDE**  
Regional Director *mca*

604538

**SUBJECT :** MTCP- TESDA Training Program on Disaster Risk Management

**DATE :** May 10, 2017

The Malaysian Technical Cooperation Programme (MTCP), in coordination with the technical Education and Skills Development Authority (TESDA) is inviting interested applicants to attend the training program entitled, "Disaster Risk Management," on July 23 to 31, 2017 in Malaysia.

Interested applicants must:

- be individuals from government, non-government organizations and civil societies which involved either directly or indirectly in disaster management locally or internationally;
- be below 45 years old;
- be proficient in spoken and written English;
- be in good mental and physical health;
- not have participated in any course under MTCP; and,
- possess a valid passport.

The Government of Malaysia shall shoulder round trip tickets, medical and dental treatment in government hospitals or clinics, and tuition fees under the MTCP. Accommodation and subsistence allowance shall also be provided subject to the policy indicated in the *Executive Summary* herein enclosed.

All required documents (Annex A) must be submitted to the Regional Human Resource Development Division (HRDD) Chiefs for evaluation and proper endorsement to the National Educators Academy of the Philippines – Professional Development Division (NEAP-PDD). Applications without the aforementioned endorsement and the complete set of documentary requirements shall not be accepted.

Each division is requested to submit applications not later than 10:00 a.m. of May 12, 2017. The other details of the program are enclosed. For further inquiries and clarifications, all concerned may contact the DepEd Scholarship Secretariat at (02) 633-9455, **Sancha M. Nacion**, OIC-HRDD, Regional Office V, RELC, Rawis, Legazpi City at 09154053122, or through email at [neap.pdd@deped.gov.ph](mailto:neap.pdd@deped.gov.ph).

Immediate dissemination of and compliance with this memorandum is desired.

Enclosure:

A. List of Requirements, B. Executive Summary, C. Annex A,  
D. Application Form, E. Essay Questionnaire, F. Scholarship Contract.

Malaysian Technical Cooperation Programme (MTCP), in coordination with the Technical Education and Skills Development Authority (TESDA)  
Disaster Risk Management  
23 to 31 July, 2017  
Malaysia

## LIST OF REQUIREMENTS

### A. Qualifications

- a. Individuals from government, non-government organizations and civil societies which involved either directly or indirectly in disaster management locally or internationally and are nominated by the head of department/agency, institution or university or non-governmental organization and private enterprise
- b. Filipino citizen
- c. Below 45 years old
- d. Must have rendered at least two (2) years of service in the government (DepEd) at the time of nomination
- e. Must hold a permanent appointment at the organization nominating him/her
- f. Must have obtained at least a *Very Satisfactory* performance rating for two (2) consecutive period preceding the nomination
- g. Must have no pending administrative and/or criminal case
- h. Must have a college degree and/or sufficient demonstrated ability and experience related/relevant to the course applied for
- i. Must have no pending nomination for scholarship in another program/course
- j. Must have already rendered the required service obligation for a scholarship previously enjoyed
- k. Must meet the position level, age, education and experience required and specified by the donor country/organization/course
- l. Must have a good command of the English language (spoken and written)
- m. In good mental and physical health
- n. Not an expectant mother
- o. Must not have participated in any program sponsored by MTCP

### B. Documentary

- a. MTCP Application Form (5 sets)
- b. Nomination Letter
- c. Detailed and updated Curriculum Vitae
- d. Letter of Application addressed to the donor organization
- e. Nomination Letter from the Regional Director or his/her duly authorized representative (thru the Regional HRDD Chiefs)
- f. Statement of present actual duties and responsibilities relevant to the course/program, signed by the immediate supervisor (1 original)
- g. Certification from the Head/Manager of the Human Resource Department (1 original)
- h. Personal Data Sheet to include a list of training programs and seminars attended (1 original)
- i. Service record
- j. Performance rating for two (2) consecutive rating periods immediately preceding the nomination

- k. Medical certificate of physical fitness issued by a physician from a recognized accredited health institution but not the same institution where the applicant is presently employed (1 original and 3 certified copies)
- l. Certification that the applicant has no pending application for scholarship under another program signed by the immediate supervisor
- m. Certification of no pending administrative and/or criminal case signed by the applicant's respective legal / administrative officer
- n. Photocopy of Valid Passport (4 certified copies)
- o. Transcript/s of Records and Diploma/s for Baccalaureate and Graduate courses (4 certified copies)
- p. Nominee Assessment Summary (2 copies)
- q. Fully accomplished *Essay Questionnaire*
- r. Signed *Scholarship Contract*

*\*Scanned/soft copies of the above-enumerated documents must be submitted before 12 May 2017 via email at [neap.pdd@deped.gov.ph](mailto:neap.pdd@deped.gov.ph). All original documents are to be submitted directly to TESDA before the indicated deadline.*

## EXECUTIVE SUMMARY

**TITLE OF THE PROGRAM** : **Disaster Risk Management**  
**DURATION** : **July 23 – 31, 2017**  
**SPONSOR** : **Malaysian Technical Cooperation Programme**

### COURSE CONTENT:

- Part 1: Total Disaster Risk Management
  - Essentials for Humanitarian Practice
  - Total Disaster Risk Management
- Part 2: Emergency Response & Recovery/Rehabilitation & Reconstruction
  - Assessment
  - Response
- Part 3: Prevention & Mitigation/Preparedness Community Based Approaches in Disaster Risk Management
  - Climate Change Adaption (CCA) and Sustainable Development
  - Resilient City Concept and Disaster Risk Reduction

### TARGET PROFILE OF PARTICIPANTS:

- Individuals from government, non-government organizations and civil societies which involved either directly or indirectly in disaster management locally or internationally.
- Below 45 years old
- Proficient in spoken and written English.
- In good mental and physical health
- Has not participated in any course under MTCP
- Must possess a valid passport

### PROGRAM OBJECTIVES:

- To understand the principles of disaster risk reduction and response
- To encourage coordinated approach to disaster response
- To enhance capacity and efficiency of humanitarian/relief workers
- To develop and nurture the holistic concept for disaster management through Total Disaster Risk Management (TDRM)
- To promote community based approaches in disaster management
- To familiarize participants to tools and cross cutting issues in disaster response and disaster risk reduction

### PROGRAM ARRANGEMENTS:

- Round trip ticket
- Tuition fees will be borne by the Malaysian Government under the MTCP
- Accommodation and Subsistence Allowance
  - Participants will be accommodated either in hostel belonging to the training institutions or nearby hotel.
  - Participants will be given daily allowance of RM85 (USD26). However, if the training institutions provide full-board

accommodations, the subsistence allowance will not be fully provided.

- Expenses for medical and dental treatment in government hospitals/clinics will be borne by the Government of Malaysia. In case of admission in government hospitals, participants will be eligible for first class wards (two bedded or more). Dental treatment is restricted to extraction and filling only

#### **GENERAL CONDITIONS OF AWARDS**

1. This scholarship cannot be held concurrently with any other scholarship award.
2. Participants shall follow the programme approved for them. Request for change of programme will not be entertained. Participants should fully participate in all activities related to the programme.
3. Participants are NOT allowed to participate in any political and/or commercial activities in any capacity whatsoever. Participants shall not take up paid employment during the tenure of their scholarship or serve as the staff of their Diplomatic Missions in Malaysia.
4. Participants are NOT allowed to bring along their spouses or families for the duration of the course. Participants will be required to return to their own countries upon completion of the course or at the end of the tenure of the scholarship whichever is earlier.
5. The award may be terminated at any time due to unsatisfactory conduct, breach of the conditions of the award, failure to make satisfactory progress or as deemed necessary by the Malaysian training institution with the approval of the MTCP Secretariat.
6. Participants who are found to be medically unfit during the course of the programme will be required to return to their country.

**FOREIGN SCHOLARSHIP AND TRAINING PROGRAM  
TECHNICAL EDUCATION AND SKILLS DEVELOPMENT AUTHORITY**

**ANNEX A – Malaysian Technical Cooperation Program (MTCP)**

**I. Who are qualified to apply?**

- ✓ Officers and employees nominated by the head of department/agency, institution or university or non-governmental organization and private enterprise
- ✓ Must have rendered at least two years of service in the government at the time of nomination
- ✓ Must hold a permanent appointment at the organization nominating him/her
- ✓ Must have obtained at least a very satisfactory performance rating for two consecutive periods preceding the nomination
- ✓ Must have a college degree and/or sufficient demonstrated ability and experience related/relevant to the course applied for
- ✓ Must have no pending administrative and/or criminal case
- ✓ Must have no pending nomination for scholarship in another program/course
- ✓ Must have already rendered the required service obligation for a scholarship previously enjoyed
- ✓ Must meet the position level, age, education and experience required and specified by the donor country/organization/course
- ✓ Have not participated any program sponsored by MTCP

**II. Terms and Coverage**

- Nominating Agency/Institute
  - Shoulders the expenses incurred by the nominee in the course of his/her application. This covers the cost of medical examination, travel and expenses incurred in the submission of documents and interview. Once accepted these will include fees for passport and visa, if applicable.
  - Salary of the scholar to be paid for the duration of the training
- Donor Country/Organization
  - Generally, in most courses, MTCP shoulders the scholar's airfare, accommodation and allowance.

**III. Basic Documentary Requirements – Nominees must submit the following on or before the deadline set by TESDA:**

- A. Nomination Letter indicating why the nominee is being endorsed and signed by the Department Secretary or Head of Agency/University or Entity or the duly authorized official, addressed to:

**GUILING A. MAMONDIONG**  
Director General / Secretary  
Technical Education and Skills Development Authority  
TESDA Complex, East Service Road  
South Superhighway, Taguig City

ATTENTION: Foreign Scholarship and Training Program Unit  
TDI Building, TESDA Complex

- B. 1 original Personal Data Sheet to include list of training programs and seminars attended
- C. 1 original Statement of **PRESENT** Actual Duties and Responsibilities **RELEVANT** to the course certified by the immediate supervisor
- D. 1 original Certification from the Head/Manager of the Human Resource Department  
(Please see attached **CERTIFICATION** format)
- E. 4 certified copies of Transcript/s of Records and Diploma/s for Baccalaureate and Graduate courses
- F. 5 sets MTCP Application form with passport-sized photos (**STRICTLY no scanning and photocopy of pictures and fill all the blanks in the form, incomplete application forms will be considering regret. The page 3 of the form specific on the English proficiency will be completed by the HR only.**)  
Note: Please pay particular attention to the Medical Report on page 4 of the application form which needs the signature of the physician and seal of clinic, or in its absence, the license number of the physician.  
Result of the tests required (**CBC, ECG, X-ray with pregnancy test for women**) should be submitted in 4 copies (1 original & 3 certified copy)
- G. 4 certified copies of Valid Passport
- H. 2 copies of Nominee Assessment Summary (please see attached format)

Note: The MTCP Application Forms can be downloaded from the MTCP website:

[http://mtcp.kln.gov.my/download/cat\\_view/63-application-forms](http://mtcp.kln.gov.my/download/cat_view/63-application-forms)

**HANDWRITTEN APPLICATION FORMS WILL NOT BE ACCEPTED (Use A4 bond paper)**

**Please see attachment and follow the format for the last page of the application form (to be strictly followed)**

**Mark Roque**  
Telefax: 8179095/09178060759  
Email: [tesda.fstp.unit@gmail.com](mailto:tesda.fstp.unit@gmail.com)



Please affix  
passport size  
photograph

**APPLICATION FORM**

**FOR OFFICIAL USE ONLY**

**SHORT TERM COURSE IN MALAYSIA UNDER THE MALAYSIAN  
TECHNICAL COOPERATION PROGRAMME ( MTCP )**

Reference no	:	_____
Received	:	_____
Checked	:	_____

Please type or write clearly in capital letters. Do not leave any space blank. Use "NIL" or "N/A" where applicable

<b>TITLE OF COURSE:</b>	Date of commencement:
<b>NAME OF IMPLEMENTING AGENCY :</b>	

**1. PERSONAL DATA**

Family Name (surname) :	Date of birth : Day   Month   Year
First Name :	Nationality ( citizenship ) :
Other Names :	Gender : Male / Female #
City and country of birth :	Marital status : Single / Married #
Passport No :                      Type of Passport:	Religion :
Expiry Date:	

# Delete accordingly

**2. COMMUNICATION AND MAILING ADDRESS**

Applicant's Office Address :	Applicant's Postal / Home Address :
Mobile Phone Number Country   Area   Number	Home telephone Country   Area   Number
Office telephone Country   Area   Number	Telefax Country   Area   Number
Email	
Person to be contacted <b>in case of emergency</b> :	
Name :	Mobile Phone Number: _____
Telephone :	
Address :	
Email :	

**NOTE : This application form should be duly completed and endorsed by the Ministry of Foreign Affairs or the National Focal Point for Technical Assistance in your country. Forms which are incomplete or not endorsed will not be accepted**







**7. MEDICAL REPORT (to be completed by an authorized physician)**

Name of Applicant:			
Age:	Gender:	Height: cm	Weight: kg
<b>Blood Pressure:</b>			
Blood Group: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> AB <input type="checkbox"/> O <input type="checkbox"/> Other ( )			
Is the person examined at present in good health?		Is the person examined physically and mentally able to carry out intensive training away from home?	
Is the person free of infectious diseases (AIDS, tuberculosis, trachoma, skin diseases etc.)?		Does the person examined have any condition or defect (including teeth) which might require treatment during the course?	
List any abnormalities indicated in the chest X ray.		Pregnancy Test ( for women ):	
I certify that the applicant is medically fit to undertake a course in Malaysia.			
Name of Physician	:	_____	
Address of Clinic (printed)	:	_____ _____	
Telephone (printed)	:	_____	
Email	:	_____	Date : _____
Signature of Physician	:	_____	Seal of Clinic :

**NOTE : This application form should be duly completed and endorsed by the Ministry of Foreign Affairs or the National Focal Point for Technical Assistance in your country. Forms which are incomplete or not endorsed will not be accepted**

**8. APPLICANT'S DECLARATION**

I, \_\_\_\_\_ of \_\_\_\_\_  
Name of applicant Representing Country

Declare that:

- a) All information provided is true, complete and accurate to the best of my belief and knowledge, and that I have not wilfully suppressed any material facts;
- b) I am medically fit and free from any medical problems which may impair my ability to attend and complete the training in Malaysia;
- c) I will be personally liable for **all** medical expenses due to pre-existing conditions/illnesses incurred during my stay in Malaysia after my admission to any Malaysian government hospitals/clinics, and also other than those covered under the Group Personal Accident Insurance. (All successful participants are covered under Group Personal Accident. The Group Personal Accident does **not** cover any pre-existing conditions/illnesses or any outpatient medical/dental treatment. Participants are personally liable for medical expenses beyond what is covered by the insurance policy. **As the coverage is limited, participants are advised to make their own arrangements to obtain adequate medical insurance coverage for their stay in Malaysia;** and
- d) For pregnant female applicants only: I am \_\_\_\_\_ months pregnant and am/am not certified by a qualified doctor to be medically fit and in good health to travel and attend the training in Malaysia

Upon successful selection for the training award, I undertake to:

- a) carry out instructions and abide by such terms and conditions as may be stipulated by the nominating and host governments in respect of this training course;
- b) abide by the rules and regulations of the training institution in which I undertake to study in or be trained under;
- c) submit/present any report which may be required;
- d) refrain from engaging in political activities and any form of employment for profit or gain;
- e) return to my home country upon completion of the training; and
- f) discontinue the course should I be found guilty of misconduct or be medically unfit.

I fully understand that if I fail to comply with the terms and conditions of the training award, and/or any of the above declarations are found to be untrue, the award will be terminated with immediate effect and I will be liable to depart from Malaysia at my own expense.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of applicant

9. TO: GOVERNMENT OF MALAYSIA

**LETTER OF INDEMNITY**

I \_\_\_\_\_, Passport Number: \_\_\_\_\_ having an address at \_\_\_\_\_, hereby declare that I shall be personally liable for and shall indemnify the Government of Malaysia and \_\_\_\_\_ against all liabilities, claims, losses, demands, actions, suits, proceedings, costs or expenses, in part/total, whatsoever arising under the laws of Malaysia or common law which may be made or taken against the Government of Malaysia and/or \_\_\_\_\_ or incurred or become payable by the Government of Malaysia and/or \_\_\_\_\_ in respect of any medical illness, personal injury (whether fatal or otherwise), or the death of any person, by reason of my carelessness, negligence, omission or default, in the course of my training with \_\_\_\_\_ which is appointed by the Government of Malaysia.

Dated this \_\_\_\_\_ day \_\_\_\_\_ of 20\_\_\_\_

Signature of applicant )  
Name of applicant )  
Date )

In the presence of  
Signature of Witness )  
Name of Witness )  
Designation of Witness )  
I/C or Passport No. )

**NOTE : This application form should be duly completed and endorsed by the Ministry of Foreign Affairs or the National Focal Point for Technical Assistance in your country. Forms which are incomplete or not endorsed will not be accepted**

**10. TO BE COMPLETED BY THE NOMINATING GOVERNMENT**

Reasons for applicant's selection

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The post which the applicant will be required to fill upon satisfactory completion of training

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Relevance of the course to applicant's job

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**NOTE : This application form should be duly completed and endorsed by the Ministry of Foreign Affairs or the National Focal Point for Technical Assistance in your country. Forms which are incomplete or not endorsed will not be accepted**

**11. TO BE COMPLETED BY THE NOMINATING GOVERNMENT**

**OFFICIAL DECLARATION**

On behalf of the Government of \_\_\_\_\_, I \_\_\_\_\_  
Country Name of Official

Certify that :

- a) I have examined the educational, professional or other certificates quoted by the applicant in this form and I am satisfied that they are authentic and relate to the applicant
- b) The applicant is medically fit and free from infectious disease and that, having regard to his/her physical and mental history, there is no reason to suppose that the applicant is other than fit to undertake the journey to Malaysia and to remain in Malaysia for the duration of training;
- c) Should the nominee seek medical consultation/treatment for his/her pre-existing conditions/illnesses during his/her period of stay in Malaysia, he/she would be personally liable for all medical expenses incurred, other than those covered under the Group Personal Accident Insurance; an
- d) The applicant has attained a level of proficiency in both spoken and written English to enable him/her to follow the course of study/training for which he/she is being nominated.

I nominate ( Dr/Mr/Mrs/Ms\* ) \_\_\_\_\_ holding Passport No.: \_\_\_\_\_  
 for the training course.

\_\_\_\_\_  
 Name and Designation

\_\_\_\_\_  
 Signature and Official Stamp

\_\_\_\_\_  
 Name and Organisation

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
Country code Area code Office tel no.

\_\_\_\_\_  
 Email address

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
Country code Area code Office tel no.

Endorsement by the nominating country's Ministry of Foreign Affairs or the National Focal Point for Technical Assistance:

\_\_\_\_\_  
 Name

\_\_\_\_\_  
 Email Address

( Ministry's Official Stamp )

\_\_\_\_\_  
 Designation

\_\_\_\_\_  
 Name of Organisation

\_\_\_\_\_  
 Signature

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
Country code Area code Office tel no.

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
Country code Area code Office tel no.

**NOTE : This application form should be duly completed and endorsed by the Ministry of Foreign Affairs or the National Focal Point for Technical Assistance in your country. Forms which are incomplete or not endorsed will not be accepted**

Malaysian Technical Cooperation Programme (MTCP), in coordination with the Technical Education and Skills Development Authority (TESDA)  
Disaster Risk Management  
23 to 31 July, 2017, Malaysia

**ESSAY QUESTIONS**  
*(Use a separate sheet, if necessary)*

Name of Applicant : \_\_\_\_\_

1. Briefly discuss your work functions.
2. Why do you want to be part of the program?
3. How can your school benefit from your attendance to the program?
4. What initiatives can you implement to promote awareness and/or appreciation of early childhood education?
5. Cite examples wherein you applied the lessons you gained from a training/conference/scholarship to your school.

MEMORANDUM OF AGREEMENT  
(Scholarship Contract)

I, \_\_\_\_\_ (NAME), Filipino, of legal age and with residence at \_\_\_\_\_ (HOME ADDRESS),  
\_\_\_\_\_ (POSITION) of \_\_\_\_\_ (SCHOOL /  
OFFICE /STATION) for and in consideration of the scholarship grant on  
\_\_\_\_\_ (PROGRAM CODE AND TITLE OF THE COURSE) at the  
\_\_\_\_\_ (VENUE OF THE COURSE) for the period  
\_\_\_\_\_ (INCLUSIVE DATES OF THE COURSE) do hereby agree to observe  
the following terms and conditions:

- a. shall maintain the academic standards and other course requirements set for by the program of the institution and Department of Education (DepEd) and that failure to do so would be sufficient grounds for disqualification and termination of the scholarship;
- b. shall conduct myself in such manner as not to bring disgrace or dishonor to myself, the institution and the DepEd;
- c. shall return to my official station and resume my functions immediately upon the completion or termination of my scholarship or training grant;
- d. shall, at the end of my scholarship or training grant, submit to the head of my office and the Department of Education (DepEd) through the National Educators Academy of the Philippines (NEAP) a copy of my scholarship reports containing lessons for the conduct of echo seminars to share new learnings, teaching innovations, and strategies to my co-teachers and administrators; various trainings, program highlights and general impressions constituting my (scholar's) evaluation of the program;
- e. shall, upon return to my station, implement the echo seminars and submit reports to the Professional Development Division, National Educators Academy of the Philippines at Second Floor, Mabini Building, DepEd Complex, Meralco Avenue, Pasig City;
- f. shall teach the subject / conduct echo seminars on the course in which I was granted the scholarship and continue to serve my school / division / region for at least three years which is the service obligation equivalent for a year of scholarship or a fraction thereof;
- g. shall refund in full to the Department of Education such sums of money as may have been defrayed by the Philippine government for expenses incidental to my scholarship, for failure to comply with any of the foregoing conditions



through my fault or willful neglect, resignation from the service, transfer to other agencies, voluntary retirement or other causes within my control.

IN WITNESS WHEREOF, I set my hand this \_\_\_\_ day of \_\_\_\_\_ at \_\_\_\_\_.

\_\_\_\_\_  
DepEd Scholar  
(signature over printed name)

\_\_\_\_\_  
Chairman, Scholarship Committee  
(signature over printed name)

Witness:

\_\_\_\_\_

\_\_\_\_\_  
Regional Director\*  
(signature over printed name)

\_\_\_\_\_  
Head, Scholarship Secretariat\*\*  
(signature over printed name)

Notarized:

SUBSCRIBED AND SWORN TO before me this \_\_\_\_ day of \_\_\_\_\_.  
Affiant exhibiting his Community Tax Certificate No. \_\_\_\_\_ issued at  
\_\_\_\_\_ on \_\_\_\_\_.

\*initials of immediate supervisor under Director's signature

\*\*initials of other members of the Scholarship Secretariat