



Republic of the Philippines  
**Department of Education**  
**MIMAROPA Region**  
SCHOOLS DIVISION OF MARINDUQUE

Department of Education  
Division of Marinduque  
**RECORDS SECTION**  
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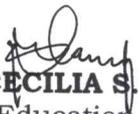
Office of the Schools Division Superintendent

**DIVISION MEMORANDUM**

TO: Asst. Schools Division Superintendent  
Chief Education Supervisors  
Education Program Supervisors  
Public Schools District Supervisors  
SGOD Personnel (In-Charge of Districts)  
School Heads, Public and Private Secondary Schools /SUC  
School Testing Coordinators  
All Others Concerned

FROM: **LYNN G. MENDOZA, EdD**  
OIC, Schools Division Superintendent

For the SDS:

  
**MA. CECILIA S. MANAY**  
Chief Education Supervisor, SGOD  
Officer In-Charge

SUBJECT: **ADMINISTRATION OF NATIONAL ACHIEVEMENT TEST FOR GRADE 12 (NATG12) FOR SCHOOL YEAR 2023-2024**

DATE: March 18, 2024

1. With reference to DepEd Memorandum No. 16, s. 2024 on the Administration of ELLNA, NATG6 and NATG12 for School Year 2023-2024, this Office hereby informs all concerned on the Administration of **National Achievement Test for Grade 12 (NATG12) on March 21-22, 2024**. All Grade 12 learners in public and private secondary schools shall take the test through a paper-based modality.
2. Attached is the Monitoring Tool on the conduct of NATG12. Hard copies of the accomplished monitoring tool shall be submitted to the Division Testing Coordinator on March 25, 2024.
3. Travel expenses of Room Examiners and Supervising Examiners shall be charged against the school MOOE fund while travelling expenses of the Division Key Testing

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Malusak, Boac, Marinduque  
Email: [marinduque@deped.gov.ph](mailto:marinduque@deped.gov.ph)  
Tel. No.: (042) 754-0247 • Fax No.: (042) 332-1611  
Facebook Page: DepEd Tayo Marinduque

Personnel and monitors and other incidental expenses shall be charged against Program Support Fund of NASBE subject to the usual auditing rules and regulations.

4. School assignments of Room Examiners / Supervising Examiners can be found in <https://tinyurl.com/2024NATG12TestingPersonnel>. This shall serve as the Locator Slip of all personnel involved in the administration of the said assessment.
5. For queries and concerns, contact Fretzie P. Alcantara, EdD, Division Testing Coordinator through [fretzie.alcantara@deped.gov.ph](mailto:fretzie.alcantara@deped.gov.ph) / Mobile Number: 0968-5246494.
6. For information, guidance, and compliance of all concerned.

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Republic of the Philippines  
**Department of Education**  
**BUREAU OF EDUCATION ASSESSMENT**

version 01-27-2023

**NATIONAL ACHIEVEMENT TEST FOR GRADE 12  
(NATG12)  
Monitoring Report**

Monitor: \_\_\_\_\_ Designation: \_\_\_\_\_

School: \_\_\_\_\_ Region: \_\_\_\_\_

Division: \_\_\_\_\_ Date/s of Monitoring the Test Administration: \_\_\_\_\_

**A. Testing Personnel**

Were the following testing personnel present in your assigned school?

Testing Personnel	Day 1		Day 2		Remark
	Yes ✓	No ✓	Yes ✓	No ✓	
Regional Testing Coordinator (RTC)					
Division Testing Coordinator (DTC)					
Private School Supervisor (PSS)					
Chief Examiner (CE)					
Room Supervisor/s (RS)					
Room Examiner (RE)					
Division Health Personnel (DHP)					

**B. Test Administration Schedule**

1. What test administration schedule was implemented in your assigned school? Please check [✓].

[ ] March 18-22,2024

[ ] March 21-22,2024

[ ] Others. Actual date/s of test administration within the testing window:

2. Were morning and afternoon testing sessions conducted in your assigned school? Please check [✓].

[ ] YES [ ] NO

If YES, was the test administered to the same set of students? [ ] YES [ ] NO



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**C. Grade 12 Examinees**

Number of Examinees	Day 1			Day 2		
	Male	Female	Total	Male	Female	Total
Expected						
Actual						
Total						

	Number of Testing Rooms	Remark
Day 1	AM =	
	PM* =	
Day 2	AM =	
	PM* =	

*\*Leave blank if not applicable.*

**D. Answer Sheets (AS)**

No. of ASs allocated to the school	
No. of ASs shared from another or other schools	
Total	

**E. Test Booklets (TBs)**

No. of TBs allocated to the school	TB1 =	
	TB2 =	
No. of TBs borrowed from another school or other schools	TB1 =	
	TB2 =	
Total	TB1 =	
	TB2 =	

**F. Test Administration Scheme**

If the TBs were insufficient, In test administration, is the swapping scheme applied by the school?

\_\_\_\_ Yes      \_\_\_\_ No



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**G. Other Test-related Materials**

Material	No. of Original Copies	No. of Copies that were Photocopied/ Provided to Augment the Insufficiency	Total
CETRE			
ETRE			
School Header			
Form 1			
Form 2			
Form 3			
Form 4			
Form 7			

Note: Forms 5 and 6 are for the DTC.

**H. Condition of the Test Materials**

Condition	Quantity of TBs	Serial Number/s	Affected Room Number/s
Missing page/s			
Blurred serial number			
Others (specify)			

**I. Senior High School (SHS) Core Learning Areas**

Were all SHS core learning areas (covered in the NATG12) taught by the school during the first semester? Please check [✓].

YES       NO

If NO, what subject areas were not taught during the first semester? \_\_\_\_\_

**J. Student Preparation**

1. Did the school use the **primer** in preparing the students for the test? Please check [✓].

YES       NO

If YES, how was it used by the school in preparing the students for the test? \_\_\_\_\_

2. Did the school use the **answer sheet** in preparing the students for the test? Please check [✓].

YES       NO

If YES, how was it used by the school in preparing the students for the test? \_\_\_\_\_



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**K. TESTING CENTER**

1. **School.** Did the students use their school as the testing center? Please check [✓].

[ ] YES      [ ] NO

If NO, what school was used as the alternate testing center? \_\_\_\_\_

2. **Other Classes.** Were classes of other grade levels held on testing day/s? Please check [✓].

[ ] YES      [ ] NO

If YES, what are these grade levels? \_\_\_\_\_

3. **Testing Environment.** Did the school provide a conducive testing environment to the students?

[ ] YES      [ ] NO

If NO, please explain why. \_\_\_\_\_

**L. Pre-Test**

Question	Yes	No	Remark
1. Was there a distribution area/room where the REs were met by the CE for the distribution of test materials?			
2. Were the test materials intact in boxes before the conduct of the test?			
3. Were the REs required by the CE to count their test materials before proceeding to their testing rooms?			
4. Did the REs sign Form 3 inside the distribution room?			
5. Was the list of examinees posted in each testing room at least a day before the exam?			

**M. Test Proper**

Question	Yes	No	Remark
1. Did the REs closely supervise the examinees in all test-related activities?			
2. Were the examinees <b>not allowed</b> to use <b>calculators</b> during the test?			
3. Were the examinees <b>not allowed</b> to use <b>reference materials</b> during the test?			
4. Were the examinees <b>not allowed</b> to use <b>electronic devices</b> during the test?			
5. Did the REs require the examinees to detach the stub in their AS?			



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Question	Yes	No	Remark
6. Did the REs follow the time allotment in the handbook?			
7. Were the unused TBs kept by the REs inside the plastic bags while the test was in progress?			
8. Were the used and unused TBs arranged consecutively by the RE before submitting them to the CE?			

**N. Post-Test**

Question	Yes	No	Remark
1. Were the ETREs sealed and signed by the RE inside the testing room?			
2. Were all unused ASs submitted to the CE?			
3. Were all TBs retrieved?			
4. Did the CE account the TBs before placing them in their original plastic bags and boxes?			
5. Were the contents of each ETRE complete? (used AS and Forms 1, 2, and 7)			
6. Were the contents of the CETRE complete? (School Header, unused ASs, and Forms 3 & 4) <i>Note: The CE may add envelope/s for unused AS.</i>			

**Retrieval/Accounting of Test Materials**

	Quantity
Chief Examiner's Transmittal Report Envelope (CETRE)	
Room Examiner's Transmittal Report Envelope (ETRE)	
Total Number of Envelopes	

	ETRE or Room No.	Quantity
SY 2023-2024 Scannable AS		
SY 2023-2024 additional from other school AS		
Total		



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**O. Narrative Report on Incidences of Test Irregularities** (if applicable). This applies to the pre- test, test proper, and post-test activities. Refer to DepEd Order 55, s. 2016 (Breach of Security in National Examinations and Corresponding Sanctions).

How did you address these instances of test irregularities?

**P. Overall Rating.** Rate the general performance of the testing personnel in your assigned school. Please check [✓].

[ ] Very Satisfactory    [ ] Satisfactory    [ ] Unsatisfactory

Explanation:

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**Q. Additional Remarks or Recommendations about the NATG12 Implementation**

**R. NATG12 Summary (Please do not leave this part unaccomplished/incomplete.)**

School	No. of students who used the SY 2023-2024 ALLOTTED scannable AS	No. of students who used the SY 2023-2024 additional AS from another/other schools*	Total no. of students	Date/s of Test Administration

\*Write N/A if not applicable.

<b>BEA Monitor/SDO Monitor</b> (name and signature)	Date
<b>Division Testing Coordinator (or Chief Examiner)</b> (name and signature)	Date