



Republic of the Philippines
Department of Education
Region IV-A CALABARZON
CITY SCHOOLS DIVISION OF ANTIPOLO



DEPED DIVISION OF ANTIPOLO CITY ADVISORY NO 137, S. 2018

In compliance with DepEd order No. 8, S. 2013

This Advisory is issued for the information of all Public and Private Elementary, Junior and Senior High Schools
October 17, 2018

PHILIPPINE RED CROSS 18TH RIZAL CHAPTER YOUTH ASSEMBLY

In celebration of the RCY, the Philippine Red Cross will conduct its 18th Rizal Chapter Youth Assembly on October 26, 2018 at Gymnasium of Rizal High School, Pasig City. This years' theme "RCY AMPLIFY: Advancing the Mission as People's Lifeline Imbued by the Filipino Youth."

The assembly will seek to address three (3) thematic issues namely: Child protection, Care for Persons with Disability and Gender and Diversity.

Attached is the letter of Ms. Ria Rivera of PRC, for more information and inquiry you may contact Ms. May Ann Santos, CSR-Rizal Province at cel no. 093-5187-2585

Participation of both public and private schools shall be in voluntary basis and subject to the *no-disruption-of-classes policy* stipulated in DepEd Order No. 9, S. 2005, entitled *Instituting Measures to increase Engaged Time-On-Task and Ensuring Compliance Therewith*. This is also subject to the no-collection policy as stated in DepEd Order No. 12, S. 2012, Section 3 of Republic Act no. 5546, *An Act Prohibiting the Sale of Tickets and/or the Collection of Contributions for Whatever Project or Purpose from Students and Teachers of Public and Private Schools, Colleges and Universities (Ganzon Law)* and the DepEd Order No. 66, S. 2017, *Implementing Guidelines on the Conduct of Off-Campus Activities*.

@Health-emr



PHILIPPINE RED CROSS

PHILIPPINE RED CROSS
Rizal Chapter

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8 October 2018

Adm Memo No. 08-01
Series of 2018

FROM THE CHAPTER OFFICER-IN-CHARGE

TO: DepEd Schools Division Superintendents and Red Cross Youth Coordinators
School Heads
Red Cross Youth Advisers
Red Cross Youth Volunteers

SUBJECT: Announcement and Participation of Schools to the 18th Rizal Chapter Youth
Assembly on October 26, 2018

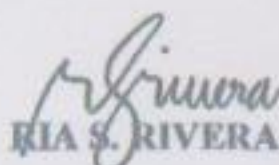
In celebration of the RCY this October, we are pleased to announce the **18th Rizal Chapter Assembly on October 26, 2018** at the Gymnasium of Rizal High School, Pasig City. This year's theme "**RCY AMPLIFY: Advancing the Mission as People's Lifeline Imbued by the Filipino Youth.**" The Assembly will seek to address three (3) Thematic Issues namely: Child Protection Policy, Care for Persons with Disability, and Gender and Diversity.

All Schools are highly encouraged to participate by sending your delegation to this event. Each council is expected to send at least 7 participants (maximum of **3 youth delegates, 2 youth observers and at least 2 RCY advisers**). Submission of form is on or before **October 18, 2018, Thursday; on or before 3:00 PM.**

For further information, attached herewith are *1. Assembly Guidelines, 2 Youth Delegate Registration Form, 3. RCY Adviser Form 4. Candidate Form*

Should you have any queries, you may reach the CSR of your Area:

Muntinlupa - Augustus Ceasar Lodronio 09175139093; Paranaque - Jasper Noel Barba 09178373986; Makati - Job Lim 09175139070; San Juan - Emmanuel Bondad 09175026092; Mandaluyong - Jenielyn Salian 09175028177; Taguig - John Fernan Ortiz 09278946701; Pasig Pateros - Steffi Celestra 09175139081; and Rizal Province - May Ann Santos 09351872585.


RIA S. RIVERA

18th

rizal chapter

youth assembly



GUIDELINES FOR THE 18TH RIZAL CHAPTER YOUTH ASSEMBLY

REGISTRATION AND DELEGATION

Each council is expected to send at least 7 participants (*maximum of 3 youth delegates, 2 youth observers and at least 2 advisers*). Assembly kit includes the following:

- a. 18th YITC Official ID
- b. Lunch

ATTIRE

Since this is a formal event, all Red Cross Youth Volunteers and Advisers are expected to be in Red Cross Youth Type A Uniform for Delegates and Formal Wear (Polo, Slacks and Black Shoes for Male; Blouse and Slacks or Dress for Female) for Observers.

QUALIFICATION AND REQUIREMENTS FOR DELEGATES / OBSERVERS

1. Has finished the Leadership Development Program (for candidates and voting delegates)
2. Must be physically and mentally fit
3. Must be a member/volunteer of an Accredited RCY Council
4. Active in their RCY Council certified by their Adviser/s
5. As much as possible, an officer or leader of the RCY Council
6. Has passed Council Registration Form attached with the following necessary documents needed by the Secretariat Committee for the Assembly on or before **October 18, 2018**:
 - a. Waiver from the Parent or Guardian
 - b. Photo & Video Documentation Waiver
 - c. Endorsement from the School/Community Head
 - d. Registration Form

QUALIFICATION AND REQUIREMENTS FOR NOMINEES

1. Has finished the Leadership Development Program (for candidates and voting delegates)
2. Must be physically and mentally fit
3. Must be a member/volunteer of an Accredited RCY Council
4. Active in their RCY Council certified by their Adviser/s
5. As much as possible, an officer or leader of the RCY Council
6. Has completed the Nomination Form attached with the following necessary documents needed by the Secretariat Committee for the Assembly on or before October 18, 2018:
 - a. Endorsement from the School/Community Head
 - b. Photocopy of LDP Certificates
 - c. Photocopy of Birth Certificate
 - d. Certificate of Good Moral Character
 - e. Parents' Approval Letter (if under 18 years old)
7. Has passed Council Registration Form attached with the following necessary documents needed by the Secretariat Committee for the Assembly on or before October 18, 2018:
 - a. Waiver from the Parent or Guardian
 - b. Photo & Video Documentation Waiver
 - c. Endorsement from the School/Community Head
 - d. Registration Form

18th

rizal chapter youth assembly



2x2 Photo
White Background
TYPE A UNIFORM

NOMINATION FORM

INSTRUCTIONS: Please write legibly and use black ink only. Submit the original copy with one (1) photocopy and two (2) colored 2x2 photos of the nominee. Please follow instructions carefully.

I. PERSONAL INFORMATION

<input type="text"/>	<input type="text"/>	<input type="text"/>		
Last Name	First Name	Middle Name		
<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>	
Membership ID	Validity	Mobile Number	E-mail Address	
<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>
Blood Type	Gender	Date of Birth	Date Recruited	Phone Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Block/House No.	Street		Barangay	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
City/Municipality	District	Province	Region	
<input type="text"/>	<input type="text"/>	<input type="text"/>		
Emergency Contact Person	Relationship	Emergency Contact Number		

II. PARENTS' APPROVAL LETTER

I, _____, hereby allow my son/daughter to become a nominee of the
Name of Parent/Guardian

18th Rizal Chapter Youth Assembly of the Philippine Red Cross (PRC) – Rizal Chapter.

If elected, I understand that I am allowing my son/daughter to commit him/herself to conduct the duties and responsibilities of such office, to attend to the CYC meetings and activities and To perform such other duties as may be designated to me in my capacity as officer.

Signature over Printed Name of Parent/Guardian

III. NOMINATION LETTER

I, _____, _____
Name of Nominator Position
of the _____ do hereby nominate
Name of School/Council being Represented
_____ for the 2018 Chapter Youth Council Election.
Name of Nominee

Signature over Printed Name of Nominator

IV. CERTIFICATION BY THE NOMINEE

TO THE CONE:

This is to certify that I voluntarily submit to the rules of the Election. I agree to provide the supporting documents and hereby authorize the Committee on Nominations and Elections (CONE) to verify the same and to conduct background investigation. I attest to all the facts contained in this form and I am aware that any misrepresentation of facts can and will be used as basis for disqualification.

I hereby give consent to my nomination as Area Youth Representative in the Chapter Youth Council. If elected, I commit myself to conduct the duties and responsibilities of such office effectively, to attend to the Chapter Youth Council meetings and activities, and to perform such other duties as may be designated to me in my capacity as an officer.

Further, I commit to initiate and undertake activities for my area within my term of office and to report regularly to the Red Cross Youth Department of the Philippine Red Cross - Rizal Chapter.

Signed this _____ day of _____, at _____
Day Month, Year Place

Signature over Printed Name of Nominee

V. COUNCIL RECOMMENDATION

This is to formally endorse _____ of _____
Nominee School/Council
to run for Area Youth Representative of our branch and eventually run for a position in the Chapter Youth Council. We believe that he/she is more than capable and eligible to be part of the CYC.

Signature over Printed Name of RCY Adviser

Signature over Printed Name of Head/Principal/OIC

VI. RED CROSS INVOLVEMENT

CATEGORY: SENIOR COLLEGE COMMUNITY

NICKNAME: _____

BRANCH: _____

DATE OF LDP: _____

TOTAL YEARS IN SERVICE: _____

A. RCY POSITION/S HELD *(Kindly use a separate sheet if needed)*

Level <small>(Council, Branch, Chapter, etc.)</small>	Council Name	Position	Inclusive Year/s

B. RED CROSS ACTIVITIES / TRAININGS UNDERTAKEN *(Kindly use a separate sheet if needed)*

Level <small>(Council, Branch, Chapter, etc.)</small>	Activity	Venue	Date/s	Position <small>(Organizer, Participant, etc.)</small>

C. AWARDS RECEIVED *(Kindly use a separate sheet if needed)*

Level <small>(Council, Branch, Chapter, etc.)</small>	Title / Name of Award	Red Cross Related? <small>(Yes or No)</small>	Year

D. ORGANIZATIONAL AFFILIATION *(Kindly use a separate sheet if needed)*

Name of Organization	Position/s Held	Inclusive Year/s

To be filled up by the CONE:

Date Received: _____

Name: _____

Signature: _____

Remarks: _____

Attachments:

LDP Certificates

Birth Certificate

Good Moral Character

Others: _____

18th

rizal chapter

youth assembly



REGISTRATION FORM

NAME OF COUNCIL:

I. PERSONAL INFORMATION

<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>
Last Name	First Name	Middle Name
<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>
Membership ID	Validity	Mobile Number
<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>
<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>
Blood Type	Gender	Date of Birth
<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>
<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>
Block/House No.	Street	Barangay
<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>
City/Municipality	District	Province
<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>
Emergency Contact Person	Relationship	Emergency Contact Number
<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>

II. WAIVER

I, _____, hereby allow my son/daughter to attend the upcoming
Name of Parent/Guardian
 18th Rizal Chapter Youth Assembly of the Philippine Red Cross (PRC) – Rizal Chapter.
 I do not hold liable the PRC – Rizal Chapter for any untoward incident that may happen
 to my son/daughter that are beyond the control of the PRC – Rizal Chapter.

 Signature Over Printed Name
 of Parent/Guardian

III. MEDICAL CERTIFICATE

This is to certify that _____ is physically and mentally fit to attend
Name of Participant
 the 18th Rizal Chapter Youth Assembly of the Philippine Red Cross (PRC) – Rizal Chapter.


De Date: _____
 Lic License No.: _____

 Signature Over Printed Name
 of Physician

18th

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CHECKLIST:			
#	REG	LDP	KIT
1			
2			
3			
4			
5			
6			
7			
8			

COUNCIL REGISTRATION FORM

NAME OF COUNCIL:

CATEGORY: SENIOR
 COLLEGE
 COMMUNITY

COMPLETE ADDRESS:

CONTACT NUMBER/S:

E-MAIL ADDRESS:

OFFICIAL DELEGATES: (* - Head of Delegation) **BRANCH:**

LAST NAME	FIRST NAME	M.I.	AGE	GENDER	CONTACT NUMBER

OBSERVERS:

ADVISERS:

Signature over Printed Name
of Head of School/Community

REMARKS:
To be filled-up by the Secretariat

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