



Republic of the Philippines
Department of Education
REGION VI – WESTERN VISAYAS
SCHOOLS DIVISION OF AKLAN

July 17, 2024

DIVISION MEMORANDUM

No. 307 s. 2024

**CALL FOR RESEARCH PROPOSALS TO BE FUNDED BY THE BASIC
EDUCATION RESEARCH FUND (BERF) FY 2025**

To: **OIC-Office of the Asst. Schools Division Superintendent
Chief Education Supervisors
Education Program Supervisors
Public Schools District Supervisors
Principals-In-Charge of the District
Senior/Education Program Specialists
Heads of Public, Elementary, Secondary and Integrated Schools
All Others Concerned**

1. Attached is Regional Memorandum No. 596, s. 2024 dated July 15, 2024, titled **Call for Research Proposals to be Funded by the Basic Education Research Fund (BERF) FY 2025**.
2. Relative to this, the Division Research Committee (DRC) will accept research proposals no later than August 30, 2024, to allow ample time for division evaluation.
3. Immediate and wide dissemination of this Memorandum is directed.


FELICIANO C. BUENAFE JR., CESO VI
Schools Division Superintendent

Reference: Regional Memorandum No.596, s. 2024
To be indicated in the Perpetual Index under the following subjects

BERF

RESEARCH

DNN



Poblacion, Numancia, Aklan
Tel/Fax No. (036) 265 3744 | (036) 265 3737 | (036) 265 3738 | (036) 265 3740 | (036) 265 3741
ebsite: <http://www.depedaklan.org>
Email Address: aklan.1958@deped.gov.ph



Republic of the Philippines
Department of Education
REGION VI – WESTERN VISAYAS

JUL 15 2024

REGIONAL MEMORANDUM
No. 596, s. 2024

**CALL FOR RESEARCH PROPOSALS TO BE FUNDED BY THE BASIC
EDUCATION RESEARCH FUND (BERF) FY 2025**

To: Assistant Regional Director
Schools Division Superintendents
Functional Division Chiefs
All Others Concerned

1. In accordance with DepEd Order No. 16, s. 2017 (Research Management Guidelines), this Office, through the Policy, Planning, and Research Division (PPRD) will be accepting research proposals to be funded by the 2025 Basic Education Research Fund (BERF) from July 15 to September 13, 2024.
2. The research topic of the submitted proposals shall be aligned with the National Agenda (DO No. 039, s. 2016) and the Additional Regional Education Research Agenda (RM No. 592 s, 2024). Research proposals that are not anchored on these agendas and repetitive interventions will be automatically disregarded.
3. The research proponent/s shall submit a complete research proposal following the prescribed outline or format attached to this memorandum together with the following documentary requirements to the Schools Division Office for evaluation:
 - a. Application Form with Endorsement of Immediate Supervisor;
 - b. Declaration of Anti-Plagiarism Form;
 - c. Declaration of Absence of Conflict of Interest Form; and
 - d. Data Privacy Consent Form
4. The stated documentary requirements and other guidelines can be downloaded from the One Drive using the access link: <https://bit.ly/BERF2025Forms>.
5. The Schools Division Offices are requested to submit an e-copy of all the approved research proposals endorsed by the Schools Division Research Committee (SDRC) together with all the documentary requirements to the



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Telephone Nos: (033) 337-0149; 336-2816
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Policy, Planning, and Research Division (PPRD) via One Drive. The access link will be e-mailed to the SEPS for Planning and Research.

6. The One Drive folder of each Schools Division Office shall include the following documents and formats:

a. Duly signed SDRC Evaluation Results Summary Form Approved Proposals with comments/findings/suggestions
(File Name: SDO Name SDRC Evaluation Summary Form 2025)
e.g. Aklan SDRC Evaluation Summary Form 2025)

b. Action Research Folder

b.1 File 1- Documentary Attachments

*(Scanned copy **combined in one (1) file**)*

Application Form with Endorsement of Immediate Supervisor

Declaration of Anti-Plagiarism Form

Declaration of Absence of Conflict of Interest Form

Data Privacy Consent Form

(File Name: 001a Surname, First Name, MI)

e.g. 001a Porras, Raymond S.

b.2 File 2- Research Proposal

*(in a **pdf copy** with research instrument/tool and workplan/timeline of liquidation report submission which is 30 days upon the release of the fund)*

(File Name: 001b Surname, First Name, MI)

e.g. 001b Porras, Raymond S.

c. Basic Research Folder

c.1 File 1- Documentary Attachments

*(Scanned copy **combined in one (1) file**)*

Application Form with Endorsement of Immediate Supervisor

Declaration of Anti-Plagiarism Form

Declaration of Absence of Conflict of Interest Form

Data Privacy Consent Form

(File Name: 001a Surname, First Name, MI)

e.g. 001a Porras, Raymond S.

c.2 File 2- Research Proposal

*(in a **pdf copy** with research instrument/tool and workplan/timeline of liquidation report submission which is 30 days upon the release of the fund)*



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(File Name: 001b Surname, First Name, MI)
e.g. 001b Porras, Raymond S.

7. The Regional Research Committee (RRC) and the Technical Working Committee (TWC) shall convene and conduct a thorough evaluation of the research proposals that have passed the Regional Secretariat's initial evaluation.
8. Research Proposals that have passed the evaluation of the RRC and the TWC will be ranked accordingly. However, the prioritization and approval of the research proposals with the corresponding cost estimates will be subject to the 75% allocation of the FY 2025 BERF grant.
9. For inquiries, contact PPRD Office through Telephone No.: (033) 503-3095 and look for Raymond S. Porras and Alan A. Pornel, Research Coordinators.
10. Immediate dissemination of and compliance with this Memorandum are desired.

RAMIR B. UYTICO EdD, CESO III
Regional Director

Enclosure: As stated
Reference: None

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

RESEARCH
POLICY
GRANT

RSP/PPRD RM on Call for Research Proposals
Q3_RM_004/July 12, 2024



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| | | |
|--|---|--------------------------------|
| BIRTHDATE (MM/DD/YYYY) | SEX: | POSITION / DESIGNATION: |
| REGION / DIVISION / SCHOOL (whichever is applicable) | | |
| CONTACT NUMBER 1: | CONTACT NUMBER 2: | EMAIL ADDRESS: |
| EDUCATIONAL ATTAINMENT (DEGREE TITLE) <i>(enumerate from bachelor's degree up to doctorate degree)</i> | TITLE OF THESIS / RELATED RESEARCH PROJECT | |
| | | |
| | | |
| SIGNATURE OF PROPONENT: | | |

IMMEDIATE SUPERVISOR'S CONFORME

I hereby endorse the attached research proposal. I certify that the proponent/s has/have the capacity to implement a research study without compromising his/her office functions.

Name and Signature of Immediate Supervisor
Position / Designation : _____
Date: _____



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PROPONENT 2

| | | | | | |
|--|--|---|--------------------------------|---------------------------|--|
| LAST NAME: | | FIRST NAME: | | MIDDLE NAME: | |
| BIRTHDATE (MM/DD/YYYY) | | SEX: | POSITION / DESIGNATION: | | |
| SCHOOL / OFFICE ADDRESS: | | | | DIVISION / REGION: | |
| CONTACT NUMBER 1: | | CONTACT NUMBER 2: | | EMAIL ADDRESS: | |
| EDUCATIONAL ATTAINMENT (DEGREE TITLE) <i>(enumerate from bachelor's degree up to doctorate degree)</i> | | TITLE OF THESIS / RELATED RESEARCH PROJECT | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| SIGNATURE OF PROPONENT: | | | | | |

IMMEDIATE SUPERVISOR'S CONFORME

I hereby endorse the attached research proposal. I certify that the proponent/s has/have the capacity to implement a research study without compromising his/her office functions.

Name and Signature of Immediate Supervisor
Position / Designation : _____
Date: _____



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PROPONENT 3

| | | | | | |
|--|--|---|--------------------------------|---------------------------|--|
| LAST NAME: | | FIRST NAME: | | MIDDLE NAME: | |
| BIRTHDATE (MM/DD/YYYY) | | SEX: | POSITION / DESIGNATION: | | |
| SCHOOL / OFFICE ADDRESS: | | | | DIVISION / REGION: | |
| CONTACT NUMBER 1: | | CONTACT NUMBER 2: | | EMAIL ADDRESS: | |
| EDUCATIONAL ATTAINMENT (DEGREE TITLE) <i>(enumerate from bachelor's degree up to doctorate degree)</i> | | TITLE OF THESIS / RELATED RESEARCH PROJECT | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| SIGNATURE OF PROPONENT: | | | | | |

IMMEDIATE SUPERVISOR'S CONFORME

I hereby endorse the attached research proposal. I certify that the proponent/s has/have the capacity to implement a research study without compromising his/her office functions.

Name and Signature of Immediate Supervisor
Position / Designation : _____
Date: _____



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Enclosure 1 Research Proposal Template

A. BASIC RESEARCH PROPOSAL TEMPLATE

- I. Introduction and Rationale
- II. Literature Review
- III. Research Questions
- IV. Scope and Limitations
- V. Research Methodology
 - a. Sampling
 - b. Data Collection
 - c. Ethical Issues
 - d. Plan for Data Analysis
- VI. Timetable/Gantt Chart
- VII. Cost Estimates
- VIII. Plans for Dissemination and Advocacy
- IX. References

B. ACTION RESEARCH TEMPLATE

- I. Context and Rationale
- II. Action Research Questions
- III. Proposed Innovation, Intervention, and Strategy
- IV. Action Research Methods
 - a. Participants and/or Sources of Data and Information
 - b. Data Gathering Methods
 - c. Ethical Issues
 - d. Data Analysis Plan
- V. Action Research Work Plan and Timelines
- VI. Cost Estimates
- VII. Plans for Dissemination and Utilization
- VIII. References



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Enclosure 2 Application Form with Endorsement of Immediate Supervisor

ANNEX 1: Research Proposal Application Form and Endorsement of Immediate Supervisor *(Please fill-out completely)*

A. RESEARCH INFORMATION

| | |
|---|--|
| RESEARCH TITLE <i>(Done/ Already conducted study is not allowed for funding under BERF)</i> | |
| SHORT DESCRIPTION OF THE RESEARCH/STUDY | |
| SCHOOL/DISTRICT/DIVISION WHERE THE STUDY TO BE CONDUCTED | |
| RESEARCH CATEGORY <i>(check only one)</i> <input type="checkbox"/> National <input type="checkbox"/> Region <input type="checkbox"/> Schools Division <input type="checkbox"/> District <input type="checkbox"/> School/Office <i>(check only one)</i> <input type="checkbox"/> Action Research <input type="checkbox"/> Basic Research | SOURCE (S) OF RESEARCH TOPIC <i>(check the source (s))</i> <input type="checkbox"/> National Agenda (DO 39, s. 2016) <input type="checkbox"/> Regional Agenda (RM 592, s. 2024) RESEARCH AGENDA CATEGORY/THEME <i>(check only one main research theme)</i> <input type="checkbox"/> Teaching and Learning <input type="checkbox"/> Child Protection <input type="checkbox"/> Human Resource Development <input type="checkbox"/> Governance <i>(check up to one cross-cutting theme, if applicable)</i> <input type="checkbox"/> DRRM <input type="checkbox"/> Inclusive Education <input type="checkbox"/> Gender and Development <input type="checkbox"/> Others (please specify): _____ |



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Enclosure 3 Declaration of Anti-Plagiarism Form

ANNEX 2: Declaration of Anti-Plagiarism

DECLARATION OF ANTI-PLAGIARISM

1. I, _____, understand that plagiarism is the act of taking and using another's ideas and works and passing them off as one's own. This includes explicitly copying the whole work of another person and/or using some parts of their work without proper acknowledgment and referencing.
2. I hereby attest to the originality of this research proposal and has cited properly all the references used. I further commit that all deliverables and the final research study emanating from this proposal shall be of original content. I shall use appropriate citations in referencing other works from various sources.
3. I understand that violation from this declaration and commitment shall be subject to consequences and shall be dealt with accordingly by the Department of Education and (insert grant mechanism).

Proponent 1 Printed Name: _____

Signature: _____

Date Signed: _____

Proponent 2 Printed Name: _____

Signature: _____

Date Signed: _____

Proponent 3 Printed Name: _____

Signature: _____

Date Signed: _____



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| | |
|--|---|
| RESEARCH TOPIC (Specify the topic under the identified theme, as indicated in the chosen research agenda (s).) e.g. CLASS SPACE under teaching and learning theme in the national agenda e.g. CURRICULUM DELIVERY-NUMERACY AND LITERACY under teaching and learning in the regional agenda (<i>must include the sub topic if applicable</i>) | National Topic: |
| | Regional Topic: |
| FUND SOURCE (e.g. BERF, SEF, others)* | AMOUNT (Note: Action Research-Maximum of 30,000.00 Pesos regardless of level) |
| | |
| | |
| TOTAL AMOUNT | |

**indicate also if proponent will use personal funds*

**amount requested should be proportionate to the study being conducted, subject to liquidation process as per government accounting rules and regulations.*

B. PROPONENT/S INFORMATION

(Maximum of 3 Proponents per Study and 1 Study Only per Year should be submitted)

Note: Previous researcher/s with unfinished study/ research will not be accepted/ recommended for further evaluation by the RRC and TWC

LEAD PROPONENT / INDIVIDUAL PROPONENT

| | | |
|-------------------|--------------------|---------------------|
| LAST NAME: | FIRST NAME: | MIDDLE NAME: |
| | | |



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Enclosure 4 Declaration of Absence of Conflict of Interest

ANNEX 3: Declaration of Absence of Conflict of Interest

DECLARATION OF ABSENCE OF CONFLICT OF INTEREST

1. I, _____, understand that conflict of interest refers to situations in which financial or other personal considerations may compromise my judgment in evaluating, conducting, or reporting research.
2. I hereby declare that I do not have any personal conflict of interest that may arise from my application and submission of my research proposal. I understand that my research proposal may be returned to me if found out that there is conflict of interest during the initial screening as per (insert RMG provision).
3. Further, in case of any form of conflict of interest (possible or actual) which may inadvertently emerge during the conduct of my research, I will duly report it to the research committee for immediate action.
4. I understand that I may be held accountable by the Department of Education and (insert grant mechanism) for any conflict of interest which I have intentionally concealed.

Proponent 1 Printed Name: _____

Signature: _____

Date Signed: _____

Proponent 2 Printed Name: _____

Signature: _____

Date Signed: _____

Proponent 3 Printed Name: _____

Signature: _____

Date Signed: _____



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Enclosure 5 Data Privacy Consent Form

DATA PRIVACY CONSENT FORM

I, _____ allows the DepEd RO VI to collect and process my/our personal information such as birth date, sex, school address, education, contact number, and place of work to be used as reference upon the submission of research proposals to be funded by Basic Education Research Fund (BERF) grant.

I further gave consent to DepEd RO VI to disclose my personal information to Central Office in case of the approval of my/our research as well as publication of the manuscript in print and online.

Proponent 1 Printed Name: _____

Signature: _____

Date Signed: _____

Proponent 2 Printed Name: _____

Signature: _____

Date Signed: _____

Proponent 3 Printed Name: _____

Signature: _____

Date Signed: _____



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Enclosure 6 Data Privacy Consent Form



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