**Endorsement**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(Date)

Respectfully forwarded to the Regional Director, DepEd Regional Office V, Rawis, Legazpi City, herein the request for **Equivalent Record Form (ERF**) of **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Position Title:\_\_\_\_\_\_\_\_\_\_\_\_

(Surname) (Given Name) (M.J.)

of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

(School) (District)

Division of Sorsogon, with the documents necessary for your approval.

**WILLIAM E. GANDO, CESO VI**

Schools Division Superintendent