



Republic of the Philippines
Department of Education
Region V
SCHOOLS DIVISION OF SORSOGON

February 16, 2024

DIVISION MEMORANDUM

No. 043 s. 2024

**CALL FOR ACTION RESEARCH PROPOSALS FOR ENDORSEMENT TO
CY 2025 FUNDING**

TO: Assistant Schools Division Superintendent
Chief Education Supervisors, CID and SGOD
Education Program Supervisors and Division Coordinators
Public Schools District Supervisors and OIC-PSDSs
Public Elementary School Heads
Public Secondary School Heads
All others concerned

1. To promote a culture of research, encourage more educational research, and support deserving researchers in the Division, this Office hereby announces the call for Action Research Proposals which will be endorsed for funding through the CY 2025 Policy Research Program Fund (Formerly BERF) or other fund sources including, but not limited to local funds and Special Education Fund (SEF), as stipulated in DepEd Order number 16 series of 2017.
2. This call is also in response to Regional Memorandum No. 000172, s. 2024 dated February 15, 2024 entitled "Call for the Submission of Action Research Paper Proposals for CY 2025 to be Funded by the Policy Research Program Fund (Formerly BERF)".
3. Action research proposals must be aligned to the Basic Education Research Agenda (DepEd Order No. 39, series 2016) or to the Basic Education Regional Research Agenda - STARSS (Regional Memorandum No. 60, series of 2021).
4. In conformance to the Research Management Guidelines of DepEd Order number 16, series of 2017, the following documents and attachments for Action Research are required:
 - ✓ Action Research Proposal manuscript with the following parts:

ACTION RESEARCH	
Body of Research: Context and Rationale Action Research Questions Proposed Innovation, Intervention & Strategy	



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Research Methods:

- Participants and Other Sources of Data & Other Info
- Data Gathering Methods
- Data Analysis Plan

Work Plan & Timelines

Cost Estimates

Plans for Dissemination and Advocacy:

- Training Design
- Work Plan

M&E Tool

Reference/s

Sample Research Instruments

- ✓ Annex 1 (DO 16 s.2017): Research Proposal Application Form and Endorsement of Immediate Supervisor
- ✓ Annex 3 (DO 16 s.2017): Declaration of Anti-Plagiarism and Absence of Conflict of Interest
- ✓ Copy of LR Evaluation Summary Tool for Locally Developed Learning Resources indicating that the LR to be used in the proposed study "Passed" the evaluation and signed by appropriate SDO official/s. (1 copy) - *applicable only for research proposals which will utilize LRs.*

The editable copies of Annex 1 and 3 of DepEd Order 16, s. 2017 can be downloaded by accessing the link: <https://bit.ly/BERFattachments> or by scanning the QR code below:



FORMATTING	
Margin	Left Side (1.5 in) Right Side (1.0 in) Top and Bottom (1.0 in)
Font and Size	Bookman Old Style
Number of Lines per page	23 Lines
Paper Size	Short Bond Paper



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5. The budget cap for **Action Research** proposals is PHP 15,000. These figures must be reflected in the submitted documents. The scope of the Action Researches will be limited to one school only. The cost estimates will reflect the list of specific activities to be conducted in the entire duration of the research activity implementation, as reflected in the Work Plan/Gantt Chart/Timeline

• **COST ESTIMATE FORMAT**

ACTIVITY	DESCRIPTION	QUANTITY	UNIT PRICE	TOTAL AMOUNT

6. All timetables must be set to Calendar Year 2025. Action Researches are given six (6) months to complete the study.
7. Interested researchers must submit the hard copy of their proposals to the Office through the records section from **February 19, 2024 to May 3, 2024 only**.
8. All submitted research proposals will be reviewed by the Schools Division Research Committee (SDRC) using the Annex 4.a and Annex 4.b of DO 16 s. 2017.
9. Qualified Research Proponents will be notified through the contact number and DepEd email they provided during the submission.
10. Since funds for the research grants are not within the Division Office, the SDRC can only endorse qualified proposals, subject to the guidelines provided in DO 16, s. 2017.
11. Expenses incurred in the conduct of this activity shall be charged to the Division Local Funds/ MOOE/ SEF subject to the usual accounting and auditing rules and regulations.
12. Immediate & widest dissemination and compliance of this Memorandum are directed.

WILLIAM E. GANDO, CESO VI
 Schools Division Superintendent



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RESEARCH PROPOSAL APPLICATION FORM AND ENDORSEMENT OF IMMEDIATE SUPERVISOR

A. RESEARCH INFORMATION

RESEARCH TITLE		
SHORT DESCRIPTION OF RESEARCH		
Research Category (Check only <u>One</u>) <input type="radio"/> Schools Division <input type="radio"/> District <input type="radio"/> School (Check only <u>One</u>) <input type="radio"/> Basic Research <input type="radio"/> Action Research	Research Agenda (DepEd Order 39, s. 2016) Check only <u>one</u> theme: <input type="radio"/> Teaching and Learning <input type="radio"/> Child Protection <input type="radio"/> Human Resource Development <input type="radio"/> Governance <input type="radio"/> Others: _____	
Check up to one cross-cutting theme, if any: <input type="radio"/> DRRM <input type="radio"/> Gender and Development <input type="radio"/> Inclusive Education		
FUND SOURCE (e.g. BERF, SEF, others)*		AMOUNT
TOTAL AMOUNT:		

**Please indicate also if proponent will use personal funds*



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B. PROPONENT INFORMATION

Lead Proponent/ Individual Proponent

NAME		FULL NAME (Last, First, M.I.):	
BIRTHDAY (MM/DD/YYYY)		SEX:	POSITION/ DESIGNATION:
REGION/ DIVISION/ SCHOOL WITH SCHOOL ID (Whichever is applicable)			
CONTACT NUMBER 1:	CONTACT NUMBER 2:	EMAIL:	
EDUCATIONAL ATTAINMENT (DEGREE TITLE) <i>Enumerate from Bachelor's degree up to Doctorate Degree</i>		TITLE OF THESIS/ RELATED RESEARCH PROJECT	
Signature of Proponent:			

Proponent 2

FULL NAME (Last, First, M.I.):			
BIRTHDAY (MM/DD/YYYY)		SEX:	POSITION/ DESIGNATION:
REGION/ DIVISION/ SCHOOL WITH SCHOOL ID (Whichever is applicable)			
CONTACT NUMBER 1:	CONTACT NUMBER 2:	EMAIL:	
EDUCATIONAL ATTAINMENT (DEGREE TITLE) <i>Enumerate from Bachelor's degree up to Doctorate Degree</i>		TITLE OF THESIS/ RELATED RESEARCH PROJECT	
Signature of Proponent:			

Proponent 3

FULL NAME (Last, First, M.I.):			
BIRTHDAY (MM/DD/YYYY)		SEX:	POSITION/ DESIGNATION:



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REGION/ DIVISION/ SCHOOL WITH SCHOOL ID (Whichever is applicable)		
CONTACT NUMBER 1:	CONTACT NUMBER 2:	EMAIL:
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 functions.

Name and Signature of Immediate Supervisor of Proponent 1
Position/ Designation: _____
Date: _____

Name and Signature of Immediate Supervisor of Proponent 2 (if different)
Position/ Designation: _____
Date: _____

Name and Signature of Immediate Supervisor of Proponent 3 (if different)
Position/ Designation: _____
Date: _____



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DECLARATION OF ANTI-PLAGIARISM

1. I/We, _____, 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 acknowledgement 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.

Proponent: _____

Signature: _____

Date: _____

Proponent: _____

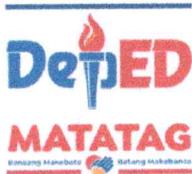
Signature: _____

Date: _____

Proponent: _____

Signature: _____

Date: _____



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DECLARATION OF ABSENCE OF CONFLICT OF INTEREST

1. I/We, _____, understand that conflict of interest refers to situations in which financial or other personal considerations may compromise my judgement 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 evaluation as per paragraph 2, of part ii.a, under section V.B. of DepEd Order 16, s. 2017.
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 for any conflict of interest which I have intentionally concealed.

Proponent: _____

Signature: _____

Date: _____

Proponent: _____

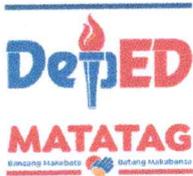
Signature: _____

Date: _____

Proponent: _____

Signature: _____

Date: _____



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