Republic of the Philippines
Department of Education

ANNEX D

ESC APPLICATION FORM

I. Privacy Notice and Background Check Authorization

Identity of the Personal Information Controller

The Department of Education (DepEd) serves as the Personal Information Controller for all data submitted for the Expanded Government Assistance to Students and Teachers in Private Education (E-GASTPE)

What we Process and Why

The E-GASTPE Program is a DepEd program that provides tuition subsidy to learners and salary subsidy to teachers in private schools. The program aims to expand access to quality education, decongest public schools and strengthen the role of private education through government subsidies and partnerships.

To successfully achieve these objectives, we may process personal and sensitive personal information from you. This includes, but is not limited to, names, date of birth, contact details, addresses, learner reference numbers, educational background and family income. The sole purpose of processing this data is as discussed above.

Lawful Basis for Processing

The processing of this personal data is necessary for the fulfillment of DepEd's statutory mandate to formulate, implement, and coordinate policies, plans, and programs for formal and non-formal basic education and manage the country's educational system in fulfillment of its mandates under the law, among others, pursuant to Section 12(b)(c)(e)(f) and Section 13(b)(d)(f) of the Data Privacy Act of 2012.

Who will have Access to the Data

Access to the submitted information is strictly limited to authorized DepEd personnel directly in charge of implementing the program. The data will not be shared with third parties unless expressly authorized by law.

How we Store and Dispose of the Data

Your information will be kept strictly confidential and protected using reasonable and appropriate organizational, physical, and technical security measures. Records will be retained for the duration of five (5) years or any retention period required by the National Archives of the Philippines, after which they will be securely disposed of.

Your Rights as a Data Subject

Under the Data Privacy Act, data subjects have the right to be informed, to access, to object, to rectify errors, to suspend or withdraw their data, and to lodge a complaint. For inquiries or concerns regarding data privacy, please contact the DepEd Data Privacy Office at **dataprivacy.dpo@deped.gov.ph** or the Government Assistance and Subsidies Service at **gass@deped.gov.ph.**

Authorization for Validation

We, the Learner-Applicant and the Parent/Legal Guardian affirm that all submitted information in support of this application is true, complete, and accurate, and acknowledge that any misrepresentation or omission may lead to disqualification from, or revocation of, DepEd tuition subsidies. We further authorize DepEd and the Private Education Assistance Committee (PEAC) to conduct background checks, verify our socio-economic status – including household visits if necessary – and to cross-check all information provided with other relevant government databases.

_____	_____
Learner-Applicant Signature over Printed Name	Parent Signature over Printed Name

II. Applicant Information

Complete Name: _____

Learner Reference Number: _____ **Date of Birth** *(e.g. 20-Apr-26)*: _____

Current Address: _____

Previous School: _____

III. Category and Requirements

□ **Category A** (Social Equity Groups)

□ **Category B** (Public School Completers)

□ **Category C** (ALS A&E or PEPT Passer)

□ **Category D** (Private School Completers)

List of General Requirements:

- □ Valid Documentary Evidence of Philippine Citizenship and Residency (e.g. birth certificate or passport)
- □ SF 9 - Learner's Progress Report Card
- □ *For ALS and PEPT Passers:* Certificate of Rating (COR)
- □ Accomplished ESC Application Form
- □ Affidavit of Family's Financial Capacity
- □ Income Tax Return; Certificate of Employment; ITR 2316; Recent Payslip; Employment Contract; Notarized Affidavit of Business; Certificate of Tax Exemption; or Barangay Certificate of Indigency
- □ Photocopy of PhilSys National ID or Printed copy of Electronic ID (ID Number: _____)

Additional supporting documents for Category A:

- □ *For 4ps beneficiaries*: Copy of 4Ps ID
- □ *For GIDCA residents*: Barangay Certification or Certification from the CHD or equal government authority specifying residency.
- □ *For IP Learners*: Copy of Certificate of Indigenous People Membership (CIPM) from the NCIP or certification from a recognized Tribal Leader/authorized representative.
- □ *For PWDs*: PWD ID issued by the LGU or equivalent government authority.
- □ *For Learners with Special Needs*: Medical/psychological assessment or proof of disability.

IV. Program Description

The **ESC Program** provides government tuition subsidies to eligible incoming Grade 7 learners in participating private Junior High Schools. This assistance covers four consecutive years of schooling, beginning in Grade 7.

Grounds for ESC Application Disapproval:

- *Failure to Meet Eligibility Criteria*
- *Falsified or Misleading Information*
- *Late Submission*
- *Incomplete Requirements*

Grounds for Termination:

- *Dropping out without a valid reason*
- *Failure to be promoted to the next grade level*
- *Suspension exceeding two (2) weeks*
- *Dismissal, or expulsion following due process*
- *Failure to re-enroll for the next school year without valid justification*
- *Transfer to a non-participating JHS*
- *Transfer to a public JHS*

V. Review of Application Requirements *(to be filled out by School Personnel)*

I hereby attest that I have personally reviewed the documents attached hereto, and that the same are complete and in order.

Reviewed and received by: _____ Date: _____

VI. School Committee *(to be filled out by School Committee)*

□ **Approved**
□ **Disapproved**

Remarks: _____
_____
_____

_____	_____	_____
Signature over printed name **School Head**	Signature over printed name **PTA Representative**	Signature over printed name **Faculty Representative**

ANNEX F

AFFIDAVIT OF FAMILY'S FINANCIAL CAPACITY[1]

I, _____, with Learner's Reference Number (LRN) _____a Filipino, [check one**: ☐ a minor represented by parent/**
(*Name of Student Applicant*)

guardian / ☐ of legal age], and a resident of _____,
(address)
after having been duly sworn to in accordance with law, do hereby depose and state the following facts to support the declarations made in the application for the DepEd Educational Service Contracting (ESC) and Senior High School Voucher Program (SHS VP):

I. STUDENT APPLICANT'S FATHER

Full Name	
Civil Status	**Tick [/] the option that applies.** ____Single/ Solo Parent ____Married ____Married, Separated ____Widower ____Annulled ____Common-law / Live-in Partner ____Unknown whereabouts
Source of Income	**Tick [/] the option that applies.** ____Employment [ ] Local [ ] Overseas Name of Employer: _____ ____Informal Employment (Tricycle/jeepney/pedicab driver, manicurist, barber, etc.) Please specify: _____ ____Micro/small business (Sari-sari store, direct selling, etc.) Please specify: _____ ____None
Gross Monthly Income	₱
Signature	

II. STUDENT APPLICANT'S MOTHER

Full Name	
Civil Status	**Tick [/] the option that applies.** ____Single/ Solo Parent ____Married ____Married, Separated ____Widower

[1]An Affidavit of Family's Financial Capacity is a **REQUIRED** form or document for all ESC and SHS VP applications. This Affidavit **MAY** be accomplished by learner applicants who are below 18 years old at the time of submission of applications represented by parent/guardian or by learner applicants of legal age.

	____Annulled ____Common-law / Live-in Partner ____Unknown whereabouts
Source of Income	**Tick [/] the option that applies.** ____Employment [ ] Local [ ] Overseas Name of Employer: _____ ____Informal Employment (Tricycle/jeepney/pedicab driver, manicurist, barber, etc.) Please specify: _____ ____Micro/small business (Sari-sari store, direct selling, etc.) Please specify: _____ ____None
Gross Monthly Income	₱
Signature	

III. STUDENT APPLICANT'S GUARDIAN (LEAVE BLANK IF NOT APPLICABLE)

Full Name	
Civil Status	**Tick [/] the option that applies.** ____Single/ Solo Parent ____Married ____Married, Separated ____Widower ____Annulled ____Common-law / Live-in Partner ____Unknown whereabouts
Source of Income	**Tick [/] the option that applies.** ____Employment [ ] Local [ ] Overseas Name of Employer: _____ ____Informal Employment (Tricycle/jeepney/pedicab driver, manicurist, barber, etc.) Please specify: _____ ____Micro/small business (Sari-sari store, direct selling, etc.) Please specify: _____ ____None
Gross Monthly Income	₱
Signature	

IV. PERSONS PROVIDING ADDITIONAL FINANCIAL SUPPORT FOR THE STUDENT APPLICANT'S EDUCATION, OTHER THAN THE PARENTS/GUARDIAN (LEAVE BLANK IF NOT APPLICABLE)

Full name:
_____

Relationship to the applicant: [ ] Relative [ ] Family Friend [ ] Benefactor/Sponsor

Amount of financial help (Monthly basis): ₱_____

I hereby confirm that I am aware that any willful, unlawful, and untruthful statement or falsehood upon material matters stated in this affidavit and/or required by this ESC and SHS VP application, as well as other violations of the Guidelines on Government Assistance and Subsidies (GAS) programs issued by DepEd, will disqualify/exclude the program applicant and may bar the learner from other subsidy programs provided by DepEd, without prejudice to applicable administrative and criminal remedies that may be pursued against me and/or all proper parties.

I am executing this affidavit to attest the truth of the foregoing facts and statements.

IN WITNESS WHEREOF, I have hereunto affixed my signature this _____ day of _____, 20__ at _____, Philippines.

_____
Affiant

SUBSCRIBED AND SWORN to before me this _____ day of _____, _____ at _____, Philippines. I hereby certify I have personally examined the above-named affiant, who confirmed to me that he/she voluntarily executed the above affidavit and understood the contents thereof.

Doc. No. _____
Page No. _____
Book No. _____
Series of _____