



Republic of the Philippines
Department of Education
REGION XI
SCHOOLS DIVISION OF PANABO CITY

0825102595

Office of the Schools Division Superintendent

DIVISION MEMORANDUM

SGOD-2025-0446

To : Assistant Schools Division Superintendent
Chief of the Curriculum Implementation Division
Chief of the School Governance and Operations Division
Public School District Supervisors
Public Elementary and Secondary School Heads
Private Elementary and Secondary School Administrators

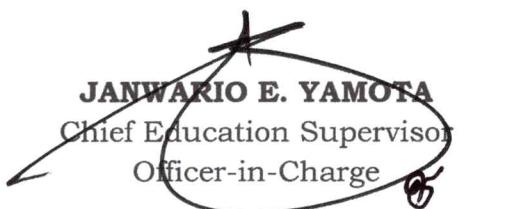
Subject : **DISSEMINATION OF SUBMISSION OF ENTRIES FOR THE 2025
SEARCH FOR OUTSTANDING VOLUNTEERS**

Date : August 18, 2025

Attached herewith is DepEd Regional Memorandum No. ESSD-2025-245, dated August 14, 2025, re: *Dissemination of Submission of Entries for the 2025 Search for the Outstanding Volunteers*, contents of which are self-explanatory.

For your information and compliance.

For and in the absence of the Schools Division Superintendent:


JANWARIO E. YAMOTA
Chief Education Supervisor
Officer-in-Charge
RELEASED

AUG 19 2025

RECORDS SECTION-SDO PANABO CITY

BY 

SGOD/aba/har



Address: City Hall Compound, Km 31, JP Laurel,
Panabo City, Davao del Norte
Telephone No: (084) 823-1469, (084) 628-4066
Email: panabocity.division@deped.gov.ph
Website: www.depedpanabocity.com

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Republic of the Philippines
Department of Education
DAVAO REGION

August 14, 2025

REGIONAL MEMORANDUM
ESSD-2025-245

DISSEMINATION OF SUBMISSION OF ENTRIES FOR THE 2025 SEARCH FOR
THE OUTSTANDING VOLUNTEERS

To: Schools Division Superintendents

1. Herewith is the Regional Disaster Risk Reduction and Management (RDRRMC) Memorandum Order No. 65, S. 2025 from Ednar Gempesaw Dayanghirang, Regional Director, Office of Civil Defense XI, regarding search for the outstanding volunteers, which is self-explanatory.
2. Immediate dissemination of this Memorandum is desired.

ALLAN G. FARNAZO
Director IV

Enclosed: As stated.
ROE6/jav

DEPARTMENT OF EDUCATION ROX.
RECORDS SECTION
RELEASED

TIME: *August 18, 2025*



Address: F. Torres St., Davao City (8000)
Telephone Nos.: (082) 291-0051
Email Address: region11@deped.gov.ph
Website: www.depedroxi.ph





Republic of the Philippines
REGIONAL DISASTER RISK REDUCTION AND MANAGEMENT COUNCIL XI

Door 210, LDL Bldg., C.P Garcia Highway, Davao City (fronting Davao International Airport)

MEMORANDUM ORDER
NO. 45, s. 2025

13 AUG 2025

8/18/2025
8:50

TO : ALL RDRRMC XI MEMBER-AGENCIES and
PROVINCIAL/CITY/MUNICIPAL DRRMCs

FROM : CHAIRPERSON, RDRRMC XI

SUBJECT : SUBMISSION OF ENTRIES FOR THE 2025 SEARCH FOR
THE OUTSTANDING VOLUNTEERS

DATE : 12 August 2025

1. In recognition of the invaluable contributions of volunteers to nation-building, the National Volunteer Month Steering Committee in coordination with the Philippine National Volunteer Service Coordinating Agency (PNVSCA) has launched the **2025 Search for Outstanding Volunteers (SOV)** on July 9, 2025.
2. The award covers volunteer activities conducted in the Philippines, excluding service rendered for family members, for religious or indoctrination purposes, and initiatives that are part of academic programs such as the NSTP.
3. In view of, all RDRRMC XI member agencies, P/C/MDRRMCs and volunteer groups are hereby enjoined to submit nominations of individuals and organizations for the 2025 SOV. We likewise encourage the dissemination of this information to your respective networks to widen the reach of the Search. Nomination forms are attached for reference and may also be downloaded from the PNVSCA and DEPDev websites:
 - www.pnvsc.gov.ph
 - dro11.depdev.gov.ph
4. Accomplished forms must be submitted to the Regional Search Committee (RSC) XI, through its Chairperson, the Regional Director of the Department of Economy, Planning, and Development XI, via email at dro11@depdev.gov.ph on or before **August 29, 2025**.



Republic of the Philippines
REGIONAL DISASTER RISK REDUCTION AND MANAGEMENT COUNCIL XI

Door 210, LDL Bldg., C.P Garcia Highway, Davao City (fronting Davao International Airport)

5. For inquiries, you may contact **Supervising EDS** Janice May A. Cerezo of DEPDev XI through telephone number **(082) 296-0160** to 64 local 112.
6. For your guidance and compliance.


DIR. EDNAR GEMPESAW DAYANGHIRANG
Chairperson, RDRRMC XI and
Regional Director, OCD XI

SEARCH FOR OUTSTANDING VOLUNTEERS 2025: INDIVIDUAL**• National Outstanding Volunteer Award (NOVA)**

*Providing volunteer assistance or implementing volunteer program/s or project/s in the last three (3) years for the youth and at least last five (5) years for the adult category at the time of submission of nomination. Please refer to the appropriate age range below:

Youth Age Group

- For nominees in all regions except BARMM: 15-30 years old
- For nominees whose address is in BARMM: 15-40 years old

Adult Age Group

- For nominees in all regions except BARMM: 31 years old and above
- For nominees whose address is in BARMM: 41 years old and above

• Volunteer Lifetime Achievement Award (VLAA)

*Engaged in consistent volunteering activities for at least twenty-five (25) years at the time of submission of nomination

**PNVSCA promotes inclusivity and equality and welcomes nomination of individuals regardless of sex, age, religion, race, class, ability, language, sexual orientation or gender identity.*

Category	NOVA	Youth <input type="checkbox"/> Adult	<input type="checkbox"/> VLAA	Region
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I. BASIC INFORMATION OF THE NOMINEE

Name of Nominee (First, Middle Initial, Surname)				
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Complete Current Address				
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Sex	Male	Female	Date of Birth (Month/Date/Year)	Email Address	
				Contact No.	

No. of Years as Volunteer		Area/Sector of Volunteer Work (e.g. education, environment, health, etc.)			
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II. BACKGROUND OF THE NOMINEE

Most significant accomplishments as a volunteer

III. VOLUNTEERING ACTIVITIES

Title and Description of Volunteering Activity <i>(Please identify maximum of five (5))</i>	Date and duration (hours)	No. of beneficiaries	Type of beneficiaries	Mode of Volunteering <i>(Onsite, online, or hybrid)</i>	Area or site where the volunteering activity was conducted	Specific role or task performed

<i>outstanding volunteering activities of the nominee)</i>	covered)					(Head, support, or participant)
1.						
2.						
3.						
4.						
5.						
Impact of volunteering activities (Use a separate sheet if necessary)						
Title of Volunteering Activity		Impact				
1.						

2.	
3.	
4.	
5.	

Plan to sustain the volunteer work (Use a separate sheet if necessary)

Additional information on volunteering activities (Use a separate sheet if necessary)

Who can we contact to verify and request further information on your volunteer work?

(When this section is left blank or the contact information is incomplete, the nomination will not be considered)

Name of Person, Organization or LGU <i>(please do not abbreviate name of organization)</i>	Contact Number	Email Address
1.		
2.		
3.		
4.		
5.		

IV. DETAILS OF NOMINATOR

Full Name <i>(First name, MI, surname)</i>		
Designation or Position		Affiliation or Organization
Office Address		

Complete Home Address			
Telephone Number and/or Mobile Number		Email	

V. NOMINEE'S CERTIFICATION

Signature above Printed Name of the Nominee

This is to certify to the best of my knowledge that the information herein provided is true and correct. I am also voluntarily submitting myself to the policies and guidelines of the Search for Outstanding Volunteers and give my consent to PNVSCA, DEPDev Regional Offices, MMDA, and BARMM-BPDA to verify the information provided in this form. In addition, I am exempting, discharging, and releasing PNVSCA and its officers and staff, as well as the members of the Search Committees from any claim or liability arising from my participation thereto.

VI. NOMINATOR'S CERTIFICATION AND ENDORSEMENT

Signature above Printed Name of the Nominator

This is to certify that I voluntarily nominate this individual to the Search for Outstanding Volunteers. By completing this form, I declare that to the best of my knowledge, the information herein provided is true and correct. I also give my consent to PNVSCA, DEPDev Regional Offices, MMDA, and BARMM-BPDA to verify the information provided in this form.

VII. DATA PRIVACY AND CONFIDENTIALITY

For any personal data/ information you provided by which you can be identified, rest assured that it will only be used in accordance with the Republic Act No. 10173 or the Data Privacy Act of 2012. We keep personal data/information for as long as it is necessary. If the purpose has been served, personal data collected will be disposed/ discarded in accordance with pertinent laws. You have the right to ask for a copy of any personal data/information we hold about you, as well as to ask for it to be corrected or updated as needed. To do so, please email us at info@pnsca.gov.ph.

SEARCH FOR OUTSTANDING VOLUNTEERS 2025: ORGANIZATION

• National Outstanding Volunteer Award (NOVA)

*Has been providing volunteer assistance consistently for at least five (5) years for the non-profit category and at least three (3) years for the corporate category at the time of submission of the nomination; and the organization must be registered with the Securities and Exchange Commission or PNVSCA or other duly recognized accrediting government institutions; or recognized as a volunteer organization by the local government, local institution or community being provided with volunteer services.

• Volunteer Lifetime Achievement Award (VLAA)

*Engaged in consistent volunteering activities for at least twenty-five (25) years at the time of submission of nomination

Category	NOVA	Non-Profit	Corporate	<input type="checkbox"/> VLAA	Region
I. BASIC INFORMATION OF THE NOMINEE					
Name of Organization					
Complete Address					
Contact No.					Email Address
Classification	<input type="checkbox"/> Foundation	<input type="checkbox"/> NGO	<input type="checkbox"/> Employees Association	<input type="checkbox"/> Others (please specify):	
Date Established					Size of Organization
No. of years the organization has been implementing volunteer programs, projects, or activities					Area or Sector of volunteer work (e.g. education, environment, health, etc.)

II. BACKGROUND OF THE NOMINEE

A. Name and Title of Current Head of Organization			
B. Names of Incorporators or Founding Members			
C. Personnel or Staff Complement			
No. of Paid Employees	Total Regular: _____ Male: _____ Female: _____	Total Contractual: _____ Male: _____ Female: _____	Grand Total: _____
No. of Volunteers Engaged	Total Full Time: _____ Male: _____ Female: _____	Total Part time/Periodic: _____ Male: _____ Female: _____	Grand Total: _____
D. Registration or Accreditation Status	SEC	LGU	Others (please specify)
E. Organizational or Institutional Affiliation	Department of Social Welfare and Development (DSWD) <input type="checkbox"/> Department of Agriculture Others (please specify):		
F. Source of Funding of Volunteering Activities			
G. Description of the Organization (use a separate sheet if necessary)			

Vision:

Mission:

Goals:

The Organization aims to:

Core Values:

Services/Programs:

Most Significant Volunteering Accomplishments:

III. VOLUNTEERING ACTIVITIES

Title and Description of Volunteering Activity	No. of volunteer s mobilized	Date and duration (hours covered)	No. of beneficiaries	Type of beneficiaries	Mode of Volunteering (Onsite, online, or hybrid)	Area or site where the volunteering activity was conducted	Specific role or task performed (Lead, organizer, support, or

1.							participant)
2.							
3.							
4.							
5.							
Title and Description of Volunteering Activity	No. of volunteers mobilized	Date and duration (hours covered)	No. of beneficiaries	Type of beneficiaries	Mode of Volunteering (Onsite, online, or hybrid)	Area or site where the volunteering activity was conducted	Specific role or task performed (Lead, organizer, support, or participant)
6.							

7.								
8.								
9.								
10.								
Impact of volunteering activities (Use a separate sheet if necessary)								

Plan to sustain the volunteer work (Use a separate sheet if necessary)

Additional information on volunteering activities (Use a separate sheet if necessary)

Awards or Recognition Related to Volunteerism			
Title of Award	Nature or Description	Date Given	Awarding Body

Who can we contact to verify and request further information on your volunteer work?

(When this section is left blank or the contact information is incomplete, the nomination will not be considered)

Name of Person, Organization, or LGU <i>(please do not abbreviate name of organization)</i>	Contact Number	Email Address
1.		
2.		
3.		
4.		
5.		

IV. DETAILS OF NOMINATOR

Full Name <i>(First name, MI, surname)</i>		
Designation or Position		Affiliation/ Organization

Office Address			
Complete Home Address			
Telephone Number and/or Mobile Number		Email	
V. NOMINEE'S CERTIFICATION			
Signature above Printed Name of the Nominee			
<p>This is to certify to that best of my knowledge that the information herein provided is true and correct. I am also voluntarily submitting myself to the policies and guidelines of the Search for Outstanding Volunteers and give my consent to PNVSCA, DEPDev Regional Offices, MMDA, and BARMM-BPDA to verify the information provided in this form. In addition, I am exempting, discharging, and releasing PNVSCA and its officers and staff, as well as the members of the Search Committees from any claim or liability arising from my participation thereto.</p>			
VI. NOMINATOR'S CERTIFICATION AND ENDORSEMENT			
Signature above Printed Name of the Nominator			
<p>This is to certify that I voluntarily nominate this individual to the Search for Outstanding Volunteers. By completing this form, I declare to the best of my knowledge, the information herein provided is true and correct. I also give my consent to PNVSCA, DEPDev Regional Offices, MMDA, and BARMM-BPDA to verify the information provided in this form.</p>			
VII. DATA PRIVACY AND CONFIDENTIALITY			
<p>For any personal data/ information you provided by which you can be identified, rest assured that it will only be used in accordance with the Republic Act No. 10173 or the Data Privacy Act of 2012. We keep personal data/ information for as long as it is necessary. If the purpose has been served, personal data collected will be disposed/ discarded in accordance with pertinent laws. You have the right to ask for a copy of any personal data/information we hold about you, as well as to ask for it to be corrected or updated as needed. To do so please emails us at info@pnavsca.gov.ph.</p>			