



Republic of the Philippines  
 Department of Education  
 CARAGA Administrative Region  
**SCHOOLS DIVISION OF SURIGAO CITY**  
 Surigao City



October 30, 2019

Division Advisory No. 44 s. 2019

**1<sup>st</sup> PHILHEALTH NATIONAL QUIZ BEE**

To : Assistant Schools Division Superintendent  
 Chief - Curriculum Implementation Division  
 Education Program Supervisors  
 Public Schools District Supervisors  
 Public and Private School Administrators  
 This Division



1. The Philippine Health Insurance Corporation (PhilHealth) will conduct the 1<sup>st</sup> PHILHEALTH NATIONAL QUIZ BEE as one of the highlights of PhilHealth's 25<sup>th</sup> Anniversary. The activity aims to measure the knowledge on the National Health Insurance Program and spelling ability on the health-related terms from Grades 10-12 in public and private schools nationwide.
2. The competition will be held in four levels: Division Level, Regional, NCR Branch Level, Area and PRO NCR Level, and the National Level.
3. In relation to this, this division will conduct the PhilHealth Quiz Bee – Division Elimination on November 11, 2019 – 8:00 AM -12:00 noon at the Division Office.
4. To ensure successful conduct of the activity, the following are assign as members of the Division TWG:
 

Overall Coordinator	: Tessie C. Dolores, PhD – Education Program Supervisor
Examiners	: Noemi D. Lim, PhD - Education Program Supervisor
	: Marcelino D. Borja - Public Schools District Supervisor
Proctors/Checkers	: Richard B. Antallan, PhD - Principal III
	: Arlene S. Bouquilon, PhD – Principal II
	: Thelma T. Tolentino, PhD – Principal III
Hall Arrangement/Decoration:	Nolan G. Martinez – Principal II
Judge (DepEd)	: Tessie C. Dolores, PhD – MAPEH Supervisor
Program Host	: Marnelli R. Esmenda - Principal I
Secretariat	: Maricar T. Lisondra - Principal I
5. Attached are the general guidelines and the test coverage for your reference. Deadline of submission of entry per school shall be on November 8, 2019 using the attached registration form. For queries kindly contact Tessie C. Dolores @09305482287/826-8931.
6. Immediate dissemination of this memorandum is highly desired.

*[Signature]*  
**KAREN L. GALANIDA, PhD, CESO VI**  
 Schools Division Superintendent

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



CURRICULUM

COMPETITION

ACTIVITIES

tcd2019

*We Serve with GOD: Goodness*

## 1<sup>ST</sup> PHILHEALTH QUIZ BEE – Division Elimination

### Guidelines and Mechanics

1. Contest shall be open to all currently enrolled Grades 10,11 and 12 students in public and private schools duly endorsed by the principal or school administrator.
2. Each school shall be represented with one (1) student only.
3. Failure of the qualified contestant/s to appear on the day or time set for the conduct of the competition shall automatically disqualify him/her from joining the competition. Replacement of contestants shall not be allowed.
4. Relatives of PhilHealth and DepEd employees up to the fourth degree of consanguinity and affinity are NOT QUALIFIED TO JOIN the contest.
5. All contestants shall accomplish the Registration Form and submit the same to the division office.
6. Contestants are allowed to have one (1 ) coach, who must be a MAPEH Faculty member of the school that the contestant represents.
7. During the contest, the coach shall be assigned a specific area to observe.
8. Questions will cover the PhilHealth Corporate Profile , policies on benefits, products and services, other matters concerning PhilHealth, UHC Act 11223, and health matters in general.
9. The competition is a paper-pencil test with time limit. Test questions will be provided by PhilHealth.
10. Specific rules on the actual conduct of the quiz shall be discussed at the beginning of the quiz.
11. The official board of judges shall determine the correctness of the answer and shall be composed of the ff:
  - PhilHealth Representatives from any of the following Unit/Section in PRO
    - a. Membership Section
    - b. Benefits Administration Section
    - c. Contribution and Collection Section
  - DepEd MAPEH Supervisor
12. Contestants will be automatically disqualified to join or continue with the competition for any violation committed or non-compliance to competition rules.
13. A cash prize of Php1,000.00 plus Certificate of Achievement for qualified student to join the Regional Level competition while students who were not qualified will receive a Certificate of Appreciation.

## 1<sup>ST</sup> PHILHEALTH QUIZ BEE – Division Elimination

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# PhilHealth National QUIZ BEE



Recent photo  
25 mm x 35 mm

## REGISTRATION FORM

### CONTESTANT'S DETAILS:

\_\_\_\_\_  
Last Name First Name Middle Name Suffix

Address: \_\_\_\_\_

Year Level: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

#### Father's Name:

\_\_\_\_\_  
Last Name First Name Middle Name Suffix

#### Mother's Maiden Name:

\_\_\_\_\_  
Last Name First Name Middle Name Suffix

#### Guardian (in the absence of the parents):

\_\_\_\_\_  
Last Name First Name Middle Name Suffix

In case of emergency contact:  Father  Mother  Guardian

Address: \_\_\_\_\_ Telephone No. \_\_\_\_\_

\_\_\_\_\_  
Contestant Date  
(signature over printed name)

### SCHOOL DETAILS:

Name of School: \_\_\_\_\_

Address: \_\_\_\_\_

Region: \_\_\_\_\_  Public School  Private School

Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

### COACH DETAILS:

\_\_\_\_\_  
Last Name First Name Middle Name Suffix

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

### CERTIFICATION AND ENDORSEMENT

This is to certify that \_\_\_\_\_ (Student's Name) is a bona fide student and his/her coach \_\_\_\_\_ (Coach's Name) is a faculty member of this Institution for SY 2019-2020. Further, the student has no relative who is a PhilHealth or DepEd employee up to the fourth degree of consanguinity or affinity. The undersigned therefore endorses his/her participation in the First PhilHealth National Quiz Bee.

\_\_\_\_\_  
School Division Head/Principal  
(signature over printed name)

\_\_\_\_\_  
Date



October 28, 2019

**DR. KAREN LASALA GALANIDA, CESO VI**  
Schools Division Superintendent  
Department of Education  
Surigao City Division  
Roxas St., Surigao City

Dear **Dr. Galanida,**

Greetings!

The Philippine Health Insurance Corporation (PHIC) shall hold a competition among Grades 10, 11, and 12 students in public and private schools nationwide entitled "First PhilHealth National Quiz Bee" that will test their knowledge on PhilHealth benefits, services, policies, and spelling ability on health-related terms.

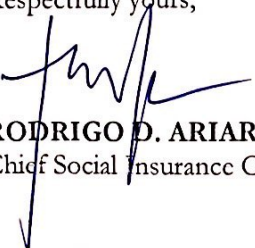
The competition will be held in four levels: (1) Division Level; (2) Regional and NCR Branch Level; (3) Area and PRO NCR Level; and (4) the National Level (Final Competition). In relation thereto, we would like to conduct the elimination round for Surigao City Division on **November 11, 2019 at 1:00 PM.** preferably at your Division Office.

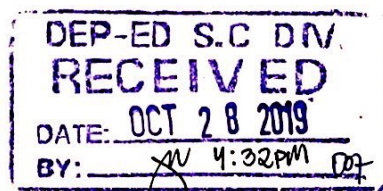
Please find attached copy of letter addressed to Hon. Secretary Leonor Briones, Regional Advisory of DepEd CARAGA, General Guidelines in the Conduct of First PhilHealth National Quiz Bee, Quiz Bee Registration Form, and Learner's Material.

For inquiries, please call Ms. Sheila Lisondra at 231-9261.

Thank you very much for your support!

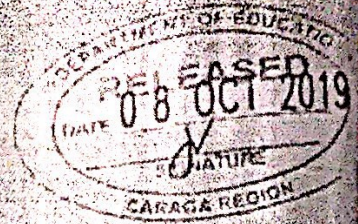
Respectfully yours,

  
**RODRIGO D. ARIAR, MPA**  
Chief Social Insurance Officer





**REGIONAL ADVISORY**  
October 3, 2019



**RE: FIRST PHILHEALTH NATIONAL QUIZ BEE**

The Philippine Health Insurance Corporation (PHIC) will conduct a "First PhilHealth National Quiz Bee" as one of the highlights of PhilHealth's 25<sup>th</sup> Anniversary. The activity aims to measure the knowledge on the National Health Insurance Program and spelling ability on the health-related terms for Grades 10 to 12 learners in public and private schools nationwide.

The competition will be held in four levels: Division Level, Regional and NCR Branch Level, Area and FRO NCR Level, and the National Level. The Division Level will be conducted from September to October 2019.

In relation to this, all SDOs are advised to participate in this activity. Officers and staff from the Local Health Insurance Office (LHIO) will coordinate with your respective offices.

For more details, kindly see the attached guidelines from PHIC.

For information and compliance.

ESSD/mml  
11/03/2019



2019-10-15048

DCC #: DepEdRO13-F-PEC-008/R1/7-24-2019