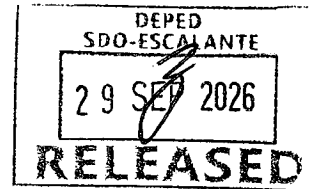




Republic of the Philippines
Department of Education
NEGROS ISLAND REGION
SCHOOLS DIVISION OF ESCALANTE CITY



September 29, 2026

DIVISION MEMORANDUM

No. 429, s. 2026

**DIVISION YOUTH FILM-MAKING WORKSHOP: CULTURAL MAPPING
AND STORYTELLING THROUGH FILM**

To: Schools Division Superintendent
Assistant Schools Division Superintendent
Chief Education Supervisors
Secondary School Heads
All Others Concerned

1. The Schools Division of Escalante City, through the Youth Formation Division (YFD) of the School Governance and Operations Division, shall conduct the **Division Youth Film-making Workshop: Cultural Mapping and Storytelling through Film** on **October 2-3, 2026 at 8:00 AM** with the following schedule and venues:
October 2, 2026 – Gabriela Hall, Escalante City
October 3, 2026 – Escalante National High School (ENHS) Junior High School ICT Laboratory
2. The activity aims to:
 - a. introduce learners to the concepts and processes of cultural mapping and cultural documentation;
 - b. develop learners' skills in identifying, researching, and presenting local stories;
 - c. enhance learners' basic competencies in storytelling, scriptwriting, cinematography, and film production;
 - d. encourage appreciation of Escalante's cultural heritage, traditions, values, and community experiences.
4. Each secondary school shall identify and send two (2) learner-participants who has the knowledge in the film-making.
5. Attached are the Matrix of Activities with the respective resource speakers and a Parent's Permit.
7. Expenses relative to the conduct of this activity shall be charged against School MOOE and or/ Program Support Funds, subject to the usual accounting and auditing rules and regulations.
8. Immediate dissemination of and compliance with this Memorandum are desired.

PETER GALIMBA

Assistant Schools Division Superintendent
OIC-Schools Division Superintendent

Encl: None
Reference: as stated
To be indicated in the Perpetual Index
Under the following subjects:

DIVISION YOUTH FILM-MAKING WORKSHOP
JVR_YFD_SGOD / 09-29-2026

CULTURAL MAPPING STORYTELLING LEARNERS



Barangay Hacienda Fe, Escalante City, Negros Occidental
Telephone Nos. (034) 445-9704/445-2686
Email Add: escalante.city001@deped.gov.ph



Deped Tayo Escalante City



deped.escalantecity.weebly.com



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Training Matrix

Day 1

Time	Activity/ Topic	Resource Person	Venue
8:00- 8:30	Opening Program	Ever Grace Negre	Gabriela Hall
8:30-9:30	"What is Local Cinema?"	Ana Erica Avanceña	
9:30-10:30	"Brainstorming for a Story"	Vermont Khan L. Juvahib, PhD	
10:30-12:00	Breakout Session: Group A and B Group A: Directing Group B: Cinematography	Ana Erica Avanceña Engels Mayron Escultor	A: Gabriela Hall B: ECES Classroom
12:00-1:00	Lunch		
1:00- 1:30	Management of Learning	Ever Grace Negre	
1:00-2:30	Breakout Session: Group A and B Group A: Screenwriting Group B: Production Design	Ana Erica Avanceña Mary Cathaline Jumawan	A: Gabriela Hall B: ECES Classroom
2:30-4:00	Breakout Session: Group A and B Group A: Production Management and Location Scouting Group B: Editing	Karyn Abong and Lea Bataycan Engels Mayron Escultor	A: Gabriela Hall B: ECES Classroom
4:00-4:30	Wrap up, setting expectations for Day 2	Ever Grace Negre	Gabriela Hall



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Day 2

Time	Activity/ Topic	Resource Person	Venue
8:00- 8:30	Management of Learning	Lea Bataycan	ENHS JHS ICT Lab
8:30-12:00	"Community and Film-making"	Direk Jonathan Jurilla	
12:00-1:00	Lunch		
1:00- 1:30	Management of Learning	Lea Bataycan	
1:00-4:00	"Stories in the Community that Matter"	Direk Jonathan Jurilla	
4:00-4:30	Wrap up, Closing Program	Ever Grace G. Negre	



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PARENT/GUARDIAN CONSENT

I, _____, parent/guardian of the above-named learner, hereby give my permission and consent for my child to participate in the **Division Youth Film-making Workshop: Cultural Mapping and Storytelling through Film** on **October 2–3, 2026**, from **8:00 AM onwards**, at the designated venues.

I understand that the activity is an official Schools Division activity and that my child is expected to observe the rules, regulations, safety protocols, and instructions of the organizers, School Heads, teachers, facilitators, and authorized personnel throughout the activity.

I further authorize the concerned school personnel and activity organizers to provide appropriate assistance to my child in case of an emergency or unforeseen situation during the conduct of the activity.

I certify that the information provided in this form is true and correct.

Parent/Guardian's Name: _____

Signature: _____

Contact Number: _____

Date: _____

Emergency Contact Person: _____

Relationship to Learner: _____

Emergency Contact Number: _____