



Republic of the Philippines
Department of Education
Region VI – Western Visayas
SCHOOLS DIVISION OF CAPIZ

Division Advisory No. 159, s. 2024
September 12, 2024

In compliance with DepEd Order (DO) No. 8, s. 2013
This advisory is issued not for endorsement per DO 28, s. 2001, but only for the
information of DepEd Capiz officials, personnel/staff, as well as the concerned
public.

(Visit www.deped.gov.ph)

Attached is Boy Scout of the Philippines Capiz Council Memorandum No. 7, s.
2024 dated September 9, 2024 titled **Simultaneous Investiture Ceremony and
Camporals/School Camp (Backyard Camping)**.

Participation to this activity is voluntary and subject to compliance with DepEd
Order No. 9, s. 2005 titled **Instituting Measures to Increase Engaged Time-On-Task
and Ensuring Compliance Therewith**, DepEd Order No. 09, s. 2024 titled
**Implementing Guidelines on the School Calendar and Activities for S.Y. 2024-
2025**, DepEd Order No. 008, s. 2023 titled **Participation of Teachers in Volunteer
Work and Extra Curricular Activities**, and DepEd Memorandum No. 41, s. 2024 titled
Reiteration of the “No Collection Policy” in School. The details and overview of this
program are attached for reference.

For more information and verification, contact:

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Boy Scouts of the Philippines
CAPIZ COUNCIL
City of Roxas

DEPED DIVISION OF CAPIZ
RECORDS SECTION
RECEIVED

DATE: SEP 10 2024
BY: _____

September 9, 2024

COUNCIL MEMORANDUM

No. 07 Series 2024

**TO : DISTRICT SCOUTING COMMISSIONER
INSTITUTIONAL HEADS, OIC'S & TIC'S
(Elementary & High School)(Public & Private)
DISTRICT FIELD SCOUT COMMISSIONERS and
INSTITUTIONAL REPRESENTATIVES for
KAWAN, TROOP AND OUTFIT ADVISORS (Coordinators)**

**SUBJECT: SIMULTANEOUS INVESTITURE CEREMONY AND CAMPORALS/SCHOOL
CAMP (BACKYARD CAMPING)**

1. The Boy Scouts of the Philippines, Capiz Council announces the conduct of the 2024 Simultaneous District Camporal/School Camp (Backyard Camping) at all levels.

Date: October 12-13, 2024

Venue: District/Cluster/School Level

2. **PURPOSE:** This investiture Ceremony and School Camp aims to;
 - a. Provide a venue where scouts and scout leaders can actively participate and involve themselves to the scouting program and activities prepared;
 - b. Help stem away vices and bad influence of prohibited drugs and peers;
 - c. Share, import, and demonstrate different scouting skills, knowledge, and scouting updates to the participants;
 - d. Develop among scouts and scouts Leaders strong sense of scouting commitment and camaraderie amidst the current situation;
 - e. Mold Scout into responsible and responsive citizen of the country and contribute to efforts to achieved quality education;
 - f. Identify and avail the opportunities for self-improvement.
3. **Qualification:**
 - a. Must be a registered Scout and Scouters of the BSP
 - b. Should be physically, mentally, and medically fit (**medical certificate and parents permit is required for Scouts only**)
4. All District Field Scout Commissioners (Kawan, Troop, and Outfit Advisor) must submit a report to avail the granted service for the services rendered on Saturday and Sunday, subject to compliance with the existing guidelines as follows;
 - a. Narrative report with picture (Documentation)
 - b. Program of Activities
 - c. Advancement form
 - d. Form 48
 - e. Daily Attendance (Logbook)
 - f. Adult Leaders must be registered with the BSP
5. Attached is the suggested scouting activities for your reference
6. For your information, guidance, and widest dissemination.

WARREN L. PAREDES

Officer-In-Charge

Office of the Council Scout Executive



Boy Scouts of the Philippines
CAPIZ COUNCIL
 City of Roxas

SUGGESTED PROGRAM OF ACTIVITIES

2024 SIMULTANEOUS INVESTITURE CEREMONY AND CAMPORAL/SCHOOL CAMP (Backyard Camping)

KID SCOUTS & KAB SCOUTS	BOY SCOUTS	SENIOR SCOUTS
KID-Discovering Talents, Creativity & Potentials at Home KAB- Responsible Citizen in the Home & Institution	Responsible Citizenship in the Institution, Community and Care for the Environment	Service to Institution, Community, Outdoor Adventure, Vocational, Exploration and Career Path Training
October 12, 2024	October 12, 2024	October 12, 2024
<ul style="list-style-type: none"> Opening Program Investiture Ceremony Smartness and Good Order Scout Ideals 	<ul style="list-style-type: none"> Opening Program Investiture Ceremony Smartness and Good Order Scout Ideals 	<ul style="list-style-type: none"> Opening Program Investiture Ceremony Smartness and Good Order Scout Ideals
Teaching Scout Skills <ul style="list-style-type: none"> KID Scout Play Day KAB/SULONG (Scout Advancement) KIDKAB SINING (Arts and Craft) KID/ KAB TANGHAL/PALABAS (Skit Pantomimes/ Puppet Show) KID/KAB PALARO & SPORTS FEST Community Service & Development Projects (Tree Planting, School Clean-up) 	Teaching Scout Skills <ul style="list-style-type: none"> DRMM (First aid and Bandaging) Basic knots Basic Lashing Respect to Flag (Flag Code) Compass Reading & Trails Signs 	Teaching Scout Skills <ul style="list-style-type: none"> DRMM (First aid and Bandaging) Basic knots Basic Lashing Respect to Flag (Flag Code) Compass Reading & Trails Signs Scouts Games (Scout Craft Games, Laro ng Lahi)
	October 13, 2024	
	<ul style="list-style-type: none"> Duty to God (Spiritual Activities)Scouts Go Scouts Games (Scout Craft, Laro ng Lahi) Scouts Go Green, Grow Green Project (Tree Planting) Hike and Cook Out (Survival Cooking) 	
Closing Program Home Sweet Home	Closing Program Home Sweet Home	October 13, 2024
		<ul style="list-style-type: none"> Duty to God (Spiritual Activities) Messenger of Peace - Peace Education (School anti-bullying Campaign) Scouts Go Green, Grow Green Project (Tree Planting) Hike and Cook Out (Survival Cooking)
		Closing Program Home Sweet Home

Boy Scouts of the Philippines
CAPIZ COUNCIL
City of Roxas

APPLICATION FORM FOR APPLICANT

Please complete all parts of the application form in block letters

Name of School _____ District _____ Area _____

PERSONAL DETAILS

Surname _____ First Name _____ Middle Initial _____
Gender _____ Date of Birth ____/____/____ (dd/mm/yy) Age _____ Height _____ Weight _____ Blood type _____
Father's Name _____ Mother's _____
Home Address _____ City/Province _____
Tel No. _____ Mobile No. _____
Unit No. _____ Membership Card No. _____ Expiration Date _____

I do hereby agree to exert my very best to be worthy as representative not only of the BSP but also my Council thru my strict observance of the Scout ideals as embodied in the Scout Oath & Law. And as faithful delegate, I shall obey and cooperate with _____ Leaders who been authorized to exercise all actions necessary to maintain the prestige of my Council in particular and the BSP in general.

Applicant's Signature
Date ____/____/____ (dd/mm/yy)

CONTACT PERSON IN CASE OF EMERGENCY

Name _____ Relation _____ Tel. No. _____
Address: _____ Mobile No. _____ E-mail _____

WAIVER
(for application for minor age)

We hereby approve this application and certify to its correctness. In Consideration of the benefits to be derived, we expressly waive any and all claims against the **School/District** _____ or its representative on account of any incident or injury or damage to personal property that may occur beyond the control of the **District, School Officials/BSP** provided and adequate safety measure and precautions have been instituted in the participation in _____.

PARENTSS/GAURDIAN/ (Signature over printed name)
Date ____/____/____ (dd/mm/yy)

HEALTHS DETAILS

Special Health Problem (Do you have any illness of the following?)

____ Heart Diseases ____ Hay Fever ____ Diabetic ____ Hypertension ____ Fainting
____ Hemophilia ____ Asthma ____ Epileptic ____ Sleep Walking ____ Autism

Any other Allergies _____
Any Physical disability _____
Others (please specify) _____
Recommendation and/or restriction (if none, so state): _____

Physician (Signature over Printed Name): _____ License No.: _____

LOCAL COUNCIL ENDORSEMENT

We hereby approved that above applicants has met all the requirement for participation from this scout event as seen form by the BSP, CAPIZ COUNCIL. We have personally interview the above applicants found him physically fit and qualified. He currently registered and on basis records of satisfactorily Scouting experience and his cooperative attitude towards his fellow scouts/Scouters. We recommend his acceptance as delegate of the _____.

Unit Leader: ____/____/____

Institutional Head: ____/____/____

OIC/CSE: ____/____/____

DISTRIBUTION: 1. Original Copy for the Regional Office 2. Duplicate Copy for Local Council Office 3. Triplicate Copy for Kawan Leader
IMPORTANT: To all signatories, please write your complete names legibly before your specimen signature for proper identification.

DISTRIBUTION: 1. Original Copy for the Regional Office 2. Duplicate Copy for Local Council Office 3. Triplicate Copy for Troop Leader/Outfit Advisor
IMPORTANT: To all signatories, please write your complete names before your specimen signature for proper identification. This Report for BOR only applies for Board of Review for Advancement Ranks. Duly approved Merit Badges need not be included in this report as practice previously.