



Department of Education
National Capital Region
Schools Division Office—Marikina City



**CAREER GUIDANCE
ADVOCACY PROGRAM
FOR GRADE 10 STUDENTS
ACTIVITY WORKSHEETS**

Name: _____

Grade and Section: _____

School: _____

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Color Your Interest!

Directions: Below are items which would further help you acknowledge your interests, preferences, and inclinations. **Color the box** containing a statement that matches your interests, preferences, and inclination. You can color as many as you want. However, please be reminded of the **DESIGNATED COLOR** for each box placed beside the statement.

1. I love reading fiction books.	BLUE	23. I like composing songs.	RED
2. I cannot go on a day without listening to my favorite songs.	RED	24. I enjoy touring people in different places.	YELLOW
3. I love solving mathematical problems.	BLUE	25. I appreciate paintings and sculptures.	RED
4. I enjoy learning new words.	BLUE	26. I enjoy styling my hair.	YELLOW
5. I am inclined to sports.	GREEN	27. I am familiar with the different parts of a computer's hardware.	YELLOW
6. I enjoy cooking food.	YELLOW	28. I am a Student Leader.	BLUE
7. I consider myself artistic and creative.	RED	29. I enjoy carpentry.	YELLOW
8. I love watching theatrical plays and the likes.	RED	30. I enjoy exploring Adobe Photoshop.	YELLOW
9. I dream of being a National Athlete someday.	GREEN	31. I enjoy discussions regarding politics.	BLUE
10. I love playing musical instruments.	RED	32. I could fix minor problems in my phone, computer, or any gadget.	YELLOW
11. I am inclined in making handicrafts.	YELLOW	33. I enjoy watching the news and keep myself updated to it.	BLUE
12. Math has always been one of my favorite subjects.	BLUE	34. I enjoy coaching my classmates in team sports activities.	GREEN
13. I could easily draw or paint my ideas.	RED	35. My ability to sing is well recognized by other people.	RED
14. I enjoy caring for our plants at home.	YELLOW	36. I want to be a computer animator someday.	YELLOW
15. I like being outdoors and enjoy physical activities.	GREEN	37. I love performing onstage, may it be singing, playing musical instruments, dancing, or acting.	RED
16. I enjoy reading and writing poetry.	BLUE	38. I dream of representing the country someday in any sports competition.	GREEN
17. I love reading science stuff.	BLUE	39. I enjoy writing literary pieces such as poems and short stories.	BLUE
18. I dream of having a physically fit body.	GREEN	40. I love expressing myself through singing, playing musical instruments, dancing, or acting.	BLUE
19. I love baking.	YELLOW		
20. I am inclined in doing business.	BLUE		
21. I love reading sports magazines.	GREEN		
22. I love painting my nails.	YELLOW		

My First Resume

Name:
Address:
Phone Number:
1. My dream job is _____ because...
2. I feel proud of myself when I...
3. If I were to win an award for a special talent or quality, it would be:
4. At school, I have done best in these subjects or activities:
5. At home, I can be counted to do a good job at:
6. Teachers, family members, friends, or others have praised me when I...

Plan A Vacation Table

What I want...
What I have...
What to do...

Plan A Vocation Table

What career I want...
What I have...
What to do...

Mock SHS Early Registration Worksheet

Name (last name, first name, & middle initial):	
School (do not abbreviate):	Address (city, town, province, or region):
Instructions: Answer the following questions below. Write your answers in the box provided.	
What school in our region is your first choice for Senior High School?	What school in our region is your second choice for Senior High School?
Name your top 2 choices among the tracks. If that track has strands, please include the strand in your answer. Write your answers in the box provided.	Name your top 2 choices among the tracks. If that track has strands, please include the strand in your answer. Write your answers in the box provided.
1.	1.
2.	2.

Signature over Printed
Name of Student

Signature over Printed
Name of Parent

Department of Education
Senior High School Preference Slip
 SY _____

TO THE STUDENT AND PARENT/GUARDIAN: Print legibly all information required. Place X marks in appropriate boxes.

1. NAME OF STUDENT: Print your full name in the following sequence: LAST, FIRST, MIDDLE.
 Place one letter in each box. Leave one box blank between names.

2. LEARNER'S REFERENCE NUMBER (LRN)

LAST																				
FIRST																				
MIDDLE																				

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3. SENIOR HIGH SCHOOL (SHS) APPLIED FOR: Choose from the list of schools offering SHS (up to two choices allowed). Do not indicate the same SHS twice. Make sure that track (Academics, TVL, Sports, Arts and Design), strand, and specialization choices are offered in the SHS indicated. Write NONE on the blank if you do not have other choices of SHS/track/strand/specialization.

Name of First Choice SHS (Do not abbreviate)

Address (City/Town or Province)

First Choice	Second Choice
Track: _____ Strand: _____	Track: _____ Strand: _____
Specializations:	Specializations:
1. _____	1. _____
2. _____	2. _____
3. _____	3. _____
4. _____	4. _____

First Choice	Second Choice
Track: _____ Strand: _____	Track: _____ Strand: _____
Specializations:	Specializations:
1. _____	1. _____
2. _____	2. _____
3. _____	3. _____
4. _____	4. _____

Name of Second Choice SHS (Do not abbreviate)

Address (City/Town or Province)

First Choice	Second Choice
Track: _____ Strand: _____	Track: _____ Strand: _____
Specializations:	Specializations:
1. _____	1. _____
2. _____	2. _____
3. _____	3. _____
4. _____	4. _____

First Choice	Second Choice
Track: _____ Strand: _____	Track: _____ Strand: _____
Specializations:	Specializations:
1. _____	1. _____
2. _____	2. _____
3. _____	3. _____
4. _____	4. _____

I affirm that:

- (1) I have read the information contained in **DepEd Order No. ____**, s. 2015 and understood all the instructions in connection with my registration;
- (2) I have been made aware of the SHS tracks and the importance of choosing the right career path through the Career Guidance Program;
- (3) The preferences supplied in this slip are a result of a well-informed decision making as discussed with my parent(s)/guardian; and
- (4) I will abide by the DepEd rules and policies in relation to the SHS program.

Furthermore, I understand that all information I provide in this form may be used by the Department of Education and I consent to such with the assurance that my personal details will be kept confidential.

Signature over Printed Name of the Student

Date

Signature over Printed Name of the Parent/Guardian

Date

THIS PREFERENCE SLIP IS NOT FOR SALE AND MAY BE REPRODUCED.

Department of Education
Senior High School Registration Form
 SY _____

TO THE STUDENT AND PARENT/GUARDIAN: Print legibly all information required. Place X marks in appropriate boxes.

1. **NAME OF STUDENT:** Print or type your full name in the following sequence: LAST, FIRST, MIDDLE.
 Place one letter in each box. Leave one box blank between names.

LAST																				
FIRST																				
MIDDLE																				

2. **SEX** Male Female

3. **DATE OF BIRTH** (Month, Day, Year)

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4. **PLACE OF BIRTH** (City/Town or Province)

5. **NATIONALITY**

6. **ELEMENTARY SCHOOL** (where you completed Elementary Level education / Grade 6)

Elementary School Name (Do not abbreviate)	Month/Year of Completion
Address (City/Town or Province)	Region

Are you a passer of Philippine Educational Placement Test (PEPT) for Elementary Level? No Yes Month/Year of Completion

Are you a passer of Accreditation and Equivalency (A&E) Test for Elementary Level? No Yes Month/Year of Completion

Name of Community Learning Center (Do not abbreviate)	Address (City/Town or Province)
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JHS Name (Do not abbreviate)	Month/Year of Completion
Address (City/Town or Province)	Region

Are you a passer of Philippine Educational Placement Test (PEPT) for JHS Level? No Yes Month/Year of Completion

Are you a passer of Accreditation and Equivalency (A&E) Test for JHS Level? No Yes Month/Year of Completion

Name of Community Learning Center (Do not abbreviate)	Address (City/Town or Province)
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8. **SENIOR HIGH SCHOOL (SHS) APPLIED FOR:** Choose from the list of schools offering SHS (up to two choices allowed). Do not indicate the same SHS twice. Make sure that track (Academics, TVL, Sports, Arts and Design), strand, and specialization choices are offered in the SHS indicated. Write NONE on the blank if you do not have other choices of SHS/track/strand/specialization.

Name of First Choice SHS (Do not abbreviate)
Address (City/Town or Province)

First Choice Track: _____ Strand: _____ Specializations: 1. _____ 2. _____ 3. _____ 4. _____	Second Choice Track: _____ Strand: _____ Specializations: 1. _____ 2. _____ 3. _____ 4. _____
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I affirm that:

- (1) I have read the information contained in **DepEd Order No. ____**, s. 2015 and understood all the instructions in connection with my registration;
- (2) I have been made aware of the SHS tracks and the importance of choosing the right career path through the Career Guidance Program;
- (3) The preferences supplied in this slip are a result of a well-informed decision making as discussed with my parent(s)/guardian; and
- (4) I will abide by the DepEd rules and policies in relation to the SHS program.

Furthermore, I understand that all information I provide in this form may be used by the Department of Education and I consent to such with the assurance that my personal details will be kept confidential.

Signature over Printed Name of the Student

Date

Signature over Printed Name of the Parent/Guardian

Date

REMINDERS:

THIS REGISTRATION FORM IS NOT FOR SALE AND MAY BE REPRODUCED.