*ANNEX M*

*CAV FORM 13-DIVISION OFFICE TRANSMITTAL TO THE REGIONAL POFFICE*

***Republic of the Philippines***

***Department of Education***

***Region X***

***Division of El Salvador City***

**1st Indorsement**

Date:

 *Respectfully forwarded to DR. ARTURO B. BAYOCOT, CESO III, Regional Director, DepEd Regional Office X, Cagayan de Oro City, the herein request of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for Certification, Authentication and Verification (CAV) of Academic School Records.*

 *For ready reference and perusal, attached are the following documents / records marked (/) below properly enclosed in sealed envelope:*

*( ) Certification of Results of Rating*

 *( ) ALS A&E*

 *( ) PEPT*

*( ) Diploma*

*( ) Form 137*

*( ) Others: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

 *For the preferential appropriate action of the Regional Director.*

**RANDOLPH B. TORTOLA**

 *Schools Division Superintendent*

*Attached: as stated.*