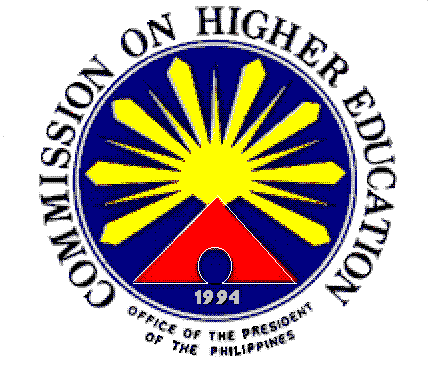
# COMMISSION ON HIGHER EDUCATION



**2X2**

**ID Picture**

**(printed name at the back)**

HEDC Bldg. CP Garcia Avenue, UP Campus,

Diliman, Quezon City

## **ENGINEERING FACULTY TRAINING**

## **ON TECHNOPRENEURSHIP:**

## **MASTERS TRAINING CERTIFICATION**

**TRAINING APPLICATION FORM**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | | |
| FULL NAME (Last name, First name, MI) | | | | | | | |
|  | / |  | / |  |  |  | |
| BIRTHDATE (mm/dd/yyyy) | | | | | GENDER | MOBILE NUMBER | |
|  | | | | |  | | |
| EMAIL ADDRESS | | | | | MAILING ADDRESS | | |
|  | | | | | | |  |
| NAME OF SENDING HIGHER EDUCATION INSTITUTION | | | | | | | REGION |

EDUCATIONAL ATTAINMENT (attach additional sheets if necessary)

|  |  |  |  |
| --- | --- | --- | --- |
|  | **SCHOOL** | **DEGREE OBTAINED / UNITS EARNED** | **DATE GRADUATED** |
| **UNDERGRADUATE** |  |  |  |
| **GRADUATE** |  |  |  |
| **POST-GRADUATE** |  |  |  |

ENGINEERING COURSES CURRENTLY TEACHING ENTPRENEURSHIP EXPERIENCE (if any)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **ENGINEERING COURSES** | **Number of Years Taught** |  | **NATURE OF BUSINESS** | **Active? (Y/N)** | **Role** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Signature over printed name of Faculty Trainee

Date

Signature over printed name of School Head

Date

### **CERTIFICATION**

This is to certify that ***(full name of faculty trainee),*** a full-time, permanent faculty of ***(Sending Higher Education Institution****)* is recommended to participate in theENGINEERING FACULTY TRAINING FOR TECHNOPRENEURSHIP: MASTERS TRAINING CERTIFICATION,at the **University of the Philippines – Diliman** for seven full days.

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (*Signature over Printed Name of Faculty Trainee)* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (*Signature over Printed Name of School Head)* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date |

Note: This must be submitted using the letterhead of the sending institution.

**TRAINING CONTRACT**

## ENGINEERING FACULTY TRAINING FOR TECHNOPRENEURSHIP: MASTERS TRAINING CERTIFICATION

The(**Sending Higher Education Institution**), a higher education institution with principal office at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ represented herein by its head, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and hereinafter referred to as “**SHEI**”;

- and -

***(Full name of Faculty Trainee)*** *o*f legal age, Filipino and residing at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ hereinafter called the “**GRANTEE**”.

And in consideration of the actual financial support for the duration of the training program benefits which will be released to GRANTEE through University of the Philippines, Diliman, the SHEI shall allow the GRANTEE to participate in the ENGINEERING FACULTY TRAINING FOR TECHNOPRENEURSHIP: MASTERS TRAINING at the **UNIVERSITY OF THE PHILIPPINES DILIMAN** for a duration of seven days commencing on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ do hereby knowingly agree to the following terms and conditions to wit:

**THAT**, the SHEI shall –

1. affirm the eligibility of the faculty applicant based on the established criteria approved by CHED;
2. provide official time to the GRANTEE during the course of the training;
3. coordinate with CHED in monitoring the progress of the GRANTEE under the program;
4. recommend the termination of the training program of the GRANTEE due to:
   1. justifiable grounds which prove the inability of the GRANTEE to complete his/her training course;
   2. commission of any act of immorality, drunkenness, dishonesty, discourtesy, and any form of misconduct; and
   3. conviction of any crime by a court or a competent administrative body;
5. ensure that the GRANTEE render at least two academic years of return service to the institution by teaching Technopreneurship to engineering students;
6. reimburse CHED the training cost of the GRANTEE in case it recalls the latter;
7. provide the CHED a certification that the GRANTEE had already rendered return service to the SHEI relative to his/her attendance to the Engineering Faculty Training Technopreneurship: Masters Training; and
8. allow the GRANTEE to serve as a Trainor in the CHED’s Trainers Training on Technopreneurship.

**THAT**, the GRANTEE shall –

* + - * 1. participate in the Engineering Faculty Training for Technopreneurship: Masters Training program;
        2. reimburse CHED the total assistance released to him/her, in case of willful abandonment of the training program, gross misconduct and non-compliance with the terms and conditions stipulated in the Training Contract;
        3. render at least two academic years of return service to the institution by teaching Technopreneurship to engineering students;
        4. submit Certificate of Completion of Return Service to the CHED upon successful completion of the training;
        5. agree to serve as Trainor in the CHED’s Trainers Training on Technopreneurship.

**WHEREFORE**, both parties signify that the above terms and conditions have been discussed to them and that they fully understand and agree to all the terms thereof.

Signed this \_\_\_\_\_day of \_\_\_\_\_ 2016, in the City/Municipality of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Philippines.

|  |  |  |
| --- | --- | --- |
| **SHEI**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ***(Name of President/Head over Signature)*** | | **GRANTEE**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ***(Name of Faculty over Signature)*** |
| **SIGNED IN THE PRESENCE OF:** | | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

##### **ACKNOWLEDGMENT**

*REPUBLIC OF THE PHILIPPINES )*

*CITY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ) s.s*

**BEFORE ME**, a Notary Public for and in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, personally appeared the following to wit:

|  |  |  |
| --- | --- | --- |
| **Name** | Valid ID/Passport No. | **Date & Place Issued** |
| ***(Head, Sending HEI)*** |  |  |
| ***(Faculty Participant)*** |  |  |

**KNOWN TO ME** to be the same persons who executed the foregoing Training Contract consisting of two (2) pages including this page and acknowledgement to me that the same is their own free act and deed.

**WITNESS MY HAND AND SEAL** on this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2016.

**Notary Public**

*Doc. No. \_\_\_\_\_\_\_\_\_\_*

Page No. \_\_\_\_\_\_\_\_\_\_

Book No. \_\_\_\_\_\_\_\_\_\_

#### Series of \_\_\_\_\_\_\_\_\_\_