



Republic of the Philippines  
**Department of Education**  
REGION I  
**SCHOOLS DIVISION OFFICE OF PANGASINAN II**

09 OCTOBER 2023

Division MEMORANDUM  
No. 495, s. 2023

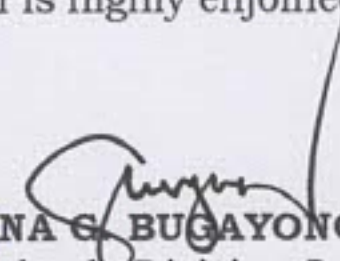
**ADMINISTRATION OF MULTI-FACTORED ASSESSMENT TOOL (MFAT)  
TO GRADE 1 LEARNERS**

To: Public Schools District Supervisors  
Elementary School Heads

1. The Department of Education through the Curriculum Implementation Division announces the administration of **Multi-Factored Assessment Tool (MFAT) to Grade 1 learners** a month after the opening of classes as provided for in DepEd Order No. 29, s. 2018 or the Policy on the Implementation of MFAT and DO 22, s. 2023 or the Implementing Guidelines on the School Calendar and Activities for the School Year 2023-2024.
2. MFAT is a screening tool intended to gather information on learners' strengths, needs, learning styles, and other educational concerns. It is a one-time assessment administered to Grade 1 learners enrolled in general education classes who may exhibit developmental advancement or delays or with manifestations of learning disability.
3. In order to plan for possible intervention, trained Grade 1 Teachers shall administer the assessment and are required to submit the MFAT results using the MFAT Consolidation Form. A sample MFAT Form D is found in enclosure No. 1.
4. The District SNED Coordinators shall conduct a re-orientation on the administration of MFAT and shall gather MFAT Form D of the schools in the district and consolidate the results using the MFAT Form E (Enclosure No. 2) to be submitted to the SNED Supervisor, Dr. Jupiter L. Petilla on or before November 3, 2023.
5. It is hereby reminded that the result of the MFAT will not in any way, affect the performance of a learner, teacher, the school or the district. If the intervention made in the school will not make improvement and/ or in academic functioning of the learner, the school may refer the learner to allied medical specialist for further assessment.
6. The MFAT Form C or MFAT Tool per child (Appendix I - DO 29, s. 2018) shall be kept in the custody of Grade I Teachers. It shall contain the interventions to be implemented by the teachers. This intervention report shall be turned over to the next grade levels for progress tracking.
7. For complete information including the detailed assessment procedure and MFAT materials/ templates, please refer to DO 29, s. 2018.
8. Immediate dissemination of this memorandum is highly enjoined.

APPROVED FOR TRANSMISSION:

ARVIN R. PURISIMA  
ADMINISTRATIVE OFFICER V

  
LORNA G. BUGAYONG PhD, CESO V  
Schools Division Superintendent



Address: Mac Arthur Highway, Canarvacanan, Binalonan, Pangasinan  
Telephone Number: (075) 637-6227  
Email Address: pangasinan2@deped.gov.ph

**FORM D. SAMPLE INDIVIDUAL MFAT RESULT**

Name of School: \_\_\_\_\_ Grade 1 Learner: \_\_\_\_\_

Direction: Check the column for YES if the learners met the indicator and NO if not.

Communication			Cognitive			Daily Living Skills			Daily Living Skills			Motor Skills		
Item No.	Yes	No	Item No.	Yes	No	Item No.	Yes	No	Item No.	Yes	No	Item No.	Yes	No
1	/		26		/	51	/		76	/		101	/	
2	/		27		/	52	/		77		/	102	/	
3	/		28		/	53	/		78		/	103	/	
4	/		29			54		/	79		/	104	/	
5	/		30		/	55		/	80		/	105	/	
6	/		31		/	56		/	81	/		106	/	
7	/		32		/	57		/	82	/		107		/
8		/	33		/	58	/	/	83	/		108		/
9		/	34	/		59		/	84		/	109	/	
10		/	35		/	60		/	85		/	110	/	
11		/	36		/	61	/		86		/	111	/	
12		/	37		/	62	/		87		/	112	/	
13	/		38	/		63	/		88		/	113	/	
14	/		39	/		64		/	89		/	114		/
15	/		40	/		65		/	90	/		115	/	
16		/	41	/		66		/	91	/		116	/	
17		/	42	/		67		/	92	/		117	/	
18	/		43		/	68		/	93	/		118	/	
19	/		44		/	69		/	94	/		119	/	
20	/		45		/	70	/		95	/		120	/	
21	/		46		/	71		/	96	/		121		/
22	/		47		/	72		/	97		/	122		/
23	/		48		/	73		/	98		/	123		/
24	/		49		/	74		/	99		/	124		/
25	/		50		/	75		/	100		/	125		/
Total	18	7		6	19		7	18		14	11		17	8

Prepared by:

NOTED:

\_\_\_\_\_  
Signature over Printed Name  
Grade 1 Teacher

\_\_\_\_\_  
Signature over Printed Name  
School Head



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**MFAT FORM E: Report on the Number of Learners Assessed, Number of Learners with Developmental Delay by Domain**  
 (Template shall be used by the District SNED Coordinators)

District: \_\_\_\_\_

School	# of Learners Assessed	Number of Learners with Developmental Delays by Domain					# of Learners Who are Developmentally Advanced	Remarks
		Cognitive	Communication	Socio-emotional	Motor	Daily Living Skills		

Prepared by:

\_\_\_\_\_  
 (Signature over Printed Name)  
 District SNED Coordinator

NOTED:

\_\_\_\_\_  
 Signature over Printed Name  
 Public Schools District Supervisor



Republic of the Philippines  
Department of Education  
Region I

SCHOOLS DIVISION OFFICE OF PANGASINAN II

**MFAT CONSOLIDATION FORM**

**Division:** \_\_\_\_\_  
**Name of Assessor:** \_\_\_\_\_

**School:** \_\_\_\_\_

DOMAIN / S	ITEM CODE	ASSESSMENT ACTIVITY (FORM)	LEARNER'S REPOSSESSES / ASSESSOR'S OBSERVATIONS	RECOMMENDATIONS (TO)

**Instruction:** (Use additional sheets)

**Domain:**

refers to the learning domain tested

**Code:**

refers to the code of the learning domain

**Assessment Activity:**

Activity given or done in assessing the child as reflected in the assessment tool

**Observations:**

How did the learner respond? What difficulties/ inconvenience did you encounter in doing the activity? What made the activity inappropriate? What should be done/changed?

**Recommendations:** How should the activity be done? What should be used? Write the suggested Assessment Activity.

**Prepared by:** \_\_\_\_\_  
Signature over Printed Name  
Gr. 1 Teacher/Assessor

**NOTED:** \_\_\_\_\_  
School Head