



Republic of the Philippines
Department of Education
REGION III – CENTRAL LUZON
SCHOOLS DIVISION OF SCIENCE CITY OF MUÑOZ

15 July 2026

SCHOOLS DIVISION MEMORANDUM

No. 246, s. 2026

**ADMINISTRATION OF MULTI-FACTORED ASSESSMENT TOOL (MFAT) AND
SUBMISSION OF RESULTS FOR SCHOOL YEAR 2026-2027**

To: Assistant Schools Division Superintendent
Chief Education Supervisors
Education Program Supervisors
Public Elementary and Secondary School Heads
All Others Concerned

1. Pursuant to DepEd Order No. 29, s. 2018 titled Policy on the Implementation of the Multi-Factored Assessment Tool (MFAT), this Office informs the field that all Grade 1 teachers are expected to administer the MFAT to Grade 1 learners who exhibit developmental advancement or delays or show manifestations of a learning disability on July 20–24, 2026, 3:00 p.m. to 5:00 p.m. to ensure that there will be no disruption to classes.
2. As basis for future monitoring and provision of technical assistance, the School Testing Coordinator shall collect the accomplished MFAT Form D from all Grade 1 teachers, consolidate the assessment results using MFAT Form E, and submit the consolidated report on July 27, 2026, through the link:
<https://drive.google.com/drive/folders/1BcepaEeR80ZSYE3jM49sMjg519TpcRGx?usp=sharing>.
3. The accomplished MFAT Form C (MFAT Tool) for each learner shall remain in the custody of the respective Grade 1 teacher and shall serve as basis for planning and implementing appropriate interventions.
4. School Heads shall monitor and supervise the proper administration of the Multi-Factored Assessment Tool (MFAT) in their respective schools.
5. Likewise, school heads and receiving teachers are tasked to effectively utilize the MFAT assessment results in designing and implementing appropriate interventions and meaningful learning experiences that address the unique educational needs of the learners.
6. For queries, please communicate with Dr. Al John U. Febrero, Division SNED Coordinator, through his messenger or cellphone number 09556756499.



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7. Wide dissemination of this Memorandum is earnestly desired.



JOHANNA N. GERVACIO PhD, CESO V
Schools Division Superintendent

Encl: as stated
Reference: as stated
To be indicated in the Perpetual Index
under the following subjects:

SNED MFAT

CID/AUF/Administration of MFAT for Grade 1 learners for SY 2026-2027
001/July 16, 2206



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Enclosure No. 1 to Schools Division Memorandum No. 246, s. 2026

MFAT Form C or the MFAT Tool

MULTI-FACTORED ASSESSMENT TOOL (MFAT)

Individual Learner Assessment Form

Region: _____
Division: _____
District: _____
School: _____
School ID: _____
School Year: 2026–2027

Learner's Name: _____
LRN: _____
Sex: _____
Age: _____
Grade/Section: _____
Mother Tongue: _____
Name of Assessor/Grade 1 Teacher: _____

Date of Assessment: _____
Time Started: _____
Time Ended: _____

Directions:

Check (✓) under **YES** if the learner performed the task or the behavior was observed.
Check **NO** if not demonstrated. Write the **learner's response/assessor's observation**
and the **intervention/recommendation** in the spaces provided.

Domain	Item Code	Assessment Activity / Task	Yes	No	Learner's Response / Assessor's Observation	Intervention / Recommendation
Cognitive						
Cognitive						
Communication						
Communication						
Socio-Emotional						
Socio-Emotional						
Psychomotor						
Psychomotor						
Daily Living Skills						



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Daily Living Skills						
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Observation Checklist

Indicator	Yes	No	Not Observed	Remarks
Has difficulty expressing needs orally				
Has difficulty listening when spoken to				
Has difficulty recognizing or following commands				
Shows unusual behavior needing further observation				
Displays possible visual, auditory, motor, or developmental concerns				

General Summary of Observations

Initial Teacher Intervention Plan

Prepared by:

Grade 1 Teacher / Assessor

Noted by:

School Head



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Enclosure No. 2 to Schools Division Memorandum No. 216, s. 2026

MFAT FORM D

SUMMARY OF MFAT RESULTS

School-Level Summary Per Learner

Learner's Name: _____

LRN: _____

Grade/Section: _____

Assessor: _____

Date Assessed: _____

Directions:

Summarize the learner's assessment result per domain based on Form C. Indicate whether the learner is age-appropriate, developmentally advanced, or has a possible developmental delay/needs further support. State the intervention and recommendation.

Domain	Result / Status	Manifestations / Noted Difficulty	Recommended Intervention	Referral Needed?
Cognitive				Yes / No
Communication				Yes / No
Socio-Emotional				Yes / No
Psychomotor				Yes / No
Daily Living Skills				Yes / No

Overall Summary

- Developmentally Appropriate
- Developmentally Advanced
- With Possible Developmental Delay
- Needs Close Monitoring
- Needs School-Based Intervention
- For Referral to Appropriate Specialist / Team

Teacher's Recommendations

Suggested School Action

Prepared by:

Grade 1 Teacher / Assessor

Reviewed by:

School Head



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Enclosure No. 3 to Schools Division Memorandum No. 246, s. 2026

MFAT FORM E

CONSOLIDATED REPORT ON MFAT RESULTS

District / Division Consolidation Form

A regional memorandum from DepEd Region I states that districts use Form E to consolidate school-submitted Form D results before submitting them to the division or region.

Region: _____

Division: _____

District: _____

School Year: 2026–2027

Name of School	No. of Grade 1 Learners Assessed	No. Developmentally Advanced	No. with Noted Difficulty in Cognitive	No. with Noted Difficulty in Communication	No. with Noted Difficulty in Socio-Emotional	No. with Noted Difficulty in Psychomotor	No. with Noted Difficulty in Daily Living Skills	No. Recommended for School-Based Intervention	No. Recommended for Referral	Remarks