



Republic of the Philippines
Department of Education
REGION VIII - EASTERN VISAYAS

Advisory No. 042, s. 2025
April 22, 2025

In compliance with DepEd Order (DO) No. 8, s. 2013
This advisory is issued not for endorsement per DO 28, s. 2001
but only for the information of DepEd officials,
personnel/staff, as well as the concerned public.
(Visit deped.in/ro8issuances)

ONLINE BASIC OCCUPATIONAL SAFETY AND HEALTH (BOSH) COURSE

Attached is a communication letter from Jessica Y. Ciudadano, Safety Training Coordinator, ACTSAFE, Health and Environmental Corp., DOLE-OSHC Accredited Safety Training Organization, inviting interested government employees to the **Online Basic Occupational Safety and Health (BOSH) Course on May 13-17, 2025.**

Participation of both public and private schools shall be subject to the *no-disruption-of-classes policy* stipulated in DepEd Order No. 9, s. 2005 entitle *Instituting Measures to Increase Engaged Time-on-Task and Ensuring Compliance Therewith.*

More information may be inquired from:

Name: Jessica Y. Ciudadano
Safety Training Coordinator
ACTSAFE, Health and Environmental Corp.,
DOLE-OSHC Accredited Safety Training Organization
Contact No.: 09317146820; 09568569393
Email Address: jeckyapciudadano@gmail.com
AHECjessicaciudadano@gmail.com

Considering that this is an Advisory, Schools Division Superintendents are given the discretion to act on this matter.

AD-PS-EDR



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ACTSAFE
HEALTH AND ENVIRONMENTAL CORP.
DOLE-OSHC Accreditation No. 1030-090320-121

121 JMK BLDG., West Avenue, Bungad, Quezon City

April 9, 2025

Greetings!



DEPARTMENT OF EDUCATION
RECEIVED
RECORDS SECTION REGIONAL OFFICE NO. VIII

DATE: 4-10-25

TRACKING #: 2672 TIME: 9:40

SIGNATURE: [Signature]

We are pleased to announce that **ACTSAFE, Health and Environmental Corp.**, a DOLE-OSHC Accredited Safety Training Organization, will be conducting an **Online Basic Occupational Safety and Health (BOSH) Course** exclusively for government employees.

This program, approved by DOLE-OSHC, is designed to enhance workplace safety and health practices in public sector offices and comply with the requirements for **Safety Officer 2 (SO2)** under the Occupational Safety and Health.

OFFICE OF THE DIRECTOR III
Date and Time Received: 9:50 **APR 11 2025**
Signature: [Signature]

Training Details:

- **Date:** May 13–17 2025
- **Time:** 8:00 AM to 5:00 PM
- **Platform:** Webinar (Zoom Pro Class)
- **Exclusivity:** For Government Employees Only
- **Training Fee:** P4,000.00
- **Covers:** Training Certificate, Training Manual (electronic copy), receipt and ID (freebie).

Key Details:

1. Purpose:

- Equip Safety Officers in government agencies with the knowledge and skills to promote workplace safety and health.
- Ensure compliance with Republic Act No. 11058 (Act Strengthening Compliance with OSH Standards).

2. Who Needs It:

- Public sector employees assigned as **Safety Officer 2** under their organization's Occupational Safety and Health Committee.
- Employees in supervisory positions with safety responsibilities.

3. Course Content:

- Introduction to Occupational Safety and Health (OSH) in the public sector.
- OSH legal basis and standards applicable to government offices.
- Hazard identification, risk assessment, and control (HIRAC).
- Accident investigation and reporting specific to public institutions.
- Emergency preparedness, disaster management, and response.
- Roles and responsibilities of Safety Officers in the public sector.
- Psychological and psychosocial risks in government workplaces.

4. After Completion:

- Trainees will be issued a certificate that qualifies them to act as **Safety Officer 2** in their respective government agency.
- ID
- Official Receipts

APR 10 2025

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Payment Details:

For bank transactions, please deposit your payment through our bank accounts:

- **BDO Account Name:** ACTSAFE, HEALTH AND ENVIRONMENTAL CORP
Account No.: 003638013927
- **China Bank Account Name:** ACTSAFE, HEALTH AND ENVIRONMENTAL CORP
Account No.: 141700003771
- **GCASH:** 09568569393 (Jessica Ciudadano)
- **PayMaya:** 09317146820 (Jessica Ciudadano)
- **Palawan Pawnshop Padala, Cebuana Lhuillier, M Lhuillier, or Western Union**
Receiver: **Jessica Ciudadano**
Contact: **09568569393**
- Please scan your deposit slip and send it to our email for verification.

For **confirmation**, please email us at:

- jeckypaciudadano@gmail.com
- AHECjessicaciudadano@gmail.com

For **inquiries**, please contact:

- **Smart:** 09317146820
- **Globe:** 09568569393
- Look for **Jessica**.

Please note that payments are non-refundable after a period of 2 months, in case the individual is unable to join the service. We recommend contacting us as soon as possible if you are unable to attend.

Thank you and we look forward to your participation in this important event. Together, let us build safer workplaces for the public sector.

Sincerely,


JESSICA Y. CIUDADANO
ACTSAFE, Health and Environmental Corp.
DOLE-OSHC Accredited Safety Training Organization
Safety Training Coordinator

ACTSAFE, HEALTH & ENVIRONMENTAL CORP.

DOLE-OSHC Accreditation No.: 1030-090323-0121

corporate mobile number for further information:

Contact Us At: jeckyapciudadano@gmail.com/AHECjessicaciudadano@gmail.com

Corporate Mobile No.: 09568569393/09317146820

Training Consent and Authorization Form

The Actsafe, Health and Environmental Corporation is commitment to compliance of Data Privacy Act of 2012. By signing the agreement below the participants agreed to give the training center consent and authorization to process information, stored and submit to authority in accordance with Data Privacy Act of 2012. Agreement to all these provisions below is a condition to registration and participations on Occupational Safety and Health Training in compliance to Department Order 198-18 the IRR of the Republic Act 11058 "AN ACT STRENGTHENING COMPLIANCE WITH OCCUPATIONAL SAFETY AND HEALTH STANDARDS AND PROVIDING PENALTIES FOR VIOLATIONS THEREOF" under the regulations of Occupational Safety and Health Center (OSHC) of the Department of Labor and Employment (DOLE).

The following are the terms and training policy:

1. I hereby certify that I will submit the following requirements prior to acceptance on registration:
 - Fully accomplished Course Registration Form.
 - Signed consent/authorization form regarding the recorded online training and acceptance of the Online OSH Training Policy.
 - Copy of Proof of Payment.
 - Copy of two (2) valid issued government IDs (front and back).
 - 2x2 ID photo taken for the last 3 months.
2. I shall abide by all the regulations and policies on Occupational Safety and Health Training of the Accredited Safety Training Organizations (The Actsafe, Health and Environmental Corporation).
3. I hereby authorize and give voluntary consent to Actsafe, Health and Environmental Corporation to collect and process the information stated herein and training related documents and information.
4. I agree, authorize and give my consent to Actsafe, Health and Environmental Corporation to record the training for the purpose of complying the requirements of Occupational Safety and Health Center (OSHC) monitoring and evaluation process.
5. I hereby agree with the policy of deferment. In case a participant wishes to defer or withdraw their enrollment, he or she should notify ACTSAFE through email or call/text stating the reasons why he/she will withdraw or defer the registration at least five (5) days before the online classes start.
8. By Signing below, I agree to all the terms and conditions stated herein and to all the policies of Actsafe, Health and Environmental Corporation and that my agreement to all those stated above is among the conditions to my training enrollment.

09568569393/09317146820

jeckyapciudadano@gmail.com

<https://actsafecorp.com>

121 JMK Buidling, 3F Room 314, West Avenue, Quezon City



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Printed Name & Signature of Participants.



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PARTICIPANT REGISTRATION FORM

Name of Participant: (Complete Name with Middle Name)

Address:

Email Address (for personal) please complete with Brgy. for mailing:

Company (If Applicable):

Company Address, please complete with Brgy. for mailing:

Company's Email:

Industry: _____

Note: Pls. Indicate your Facebook account for our Group Chat in messenger (kindly screenshot)

Contact No.:

Age:

Designation:

Company's Contact Number:

Total Number of Workers:

Company TIN #:

Region:

Course and Training Date:

Training Course DOLE-BWC Prescribed: (Please check)

Basic OSH Training SO1 & SO2

BOSH 40Hours

COSH 40Hours

10Hours BOSH SO1

Advance OSH Training for SO3 & SO4

LCM 40Hours

SPHA 40Hours

TOT 24Hours

For 1 Day and 2 Days OSH Training: _____

For International OSH Training: _____

Mode of Payment: (Please check)

Cash:

Bank Transfer:

Other method:

(GCASH,PPS Padala,etc)

Please sent your payment advice, 2 Valid Identification Card, 2x2 Photo ID, Consent and Authorization Form together with this registration on the email below or you may contact the

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