

BEA Form 2

SEAT PLAN

Testing Program: BASIC EDUCATION EXIT ASSESSMENT (BEEA) FOR GRADE 12

REGION: _____

SCHOOL NAME: _____

DATE OF EXAM.: _____

DIVISION: _____

SCHOOL ADDRESS: _____

ROOM NO.: _____

Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____	Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____	Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____	Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____	Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____	Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____
1	2	3	4	5	6
Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____	Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____	Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____	Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____	Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____	Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____
7	8	9	10	11	12
Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____	Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____	Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____	Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____	Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____	Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____
13	14	15	16	17	18
Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____	Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____	Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____	Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____	Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____	Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____
19	20	21	22	23	24
Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____	Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____	Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____	Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____	Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____	Name Exam. No. _____ Day 1- TB No: _____ Day 2- TB No: _____
25	26	27	28	29	30

Exam. No. - Examinee Number in the Answer Sheet

TB No. - Test Booklet Number

Note:

TB-1 contains the BEEA- Science, Philosophy, Humanities, and Media and Information Literacy

TB-2 contains the NATG12- Mathematics, Languages (English and Filipino), and Social Studies

ROOM EXAMINER'S SIGNATURE OVER PRINTED NAME

SCHOOL (Where the Examiner Teaches)