



Republic of the Philippines
Department Of Education
Region XI
Schools Division of Panabo

Office of the Schools Division Superintendent

DIVISION MEMORANDUM

SGOD-2025-0389

To : Assistant Schools Division Superintendent
Chief of the Schools Governance and Operations Division
Chief of the Curriculum Implementation Division
Education Program Supervisors
Public Schools District Supervisors
All Section Heads
All Public Elementary and Secondary School Heads/Principals
All Concerned

Subject: **ADDENDUM TO DIVISION MEMORNDUM NO. 0133, S. 2025 RE:
UPDATED TEMPLATES ON LEARNING AND DEVELOPMENT
ACTIVITY/TRAINING DESIGNS ACROSS GOVERNANCE LEVEL**

Date: August 1, 2025

In reference to the Division Memorandum No. SGOD-2025-0133 re: Updated Templates on Learning and Development Activity/Training Designs across Governance Level, this Office shall follow the prescribe templates pursuant to **DM 14, s. 2022** titled **the DepEd Quality Management System (QMS) Manual and Procedures and Work Instructions Manual (PAWIM)** for OPDNTP and in consonance to **DM 44, s. 2023** titled **“Interim Guidelines for the Quality Assurance and Monitoring and Evaluation of the National Educators Academy of the Philippines Core Programs”** for the Professional Development Programs for Regional (RO) and Schools Division Offices (SDO) and **DM-OURHOD-1576, s. 2024** titled **“Guidelines on the conduct of Regional Office, Schools Division Office, and School-Developed Professional Development Programs”** for In-Service Training (INSET) and Learning Action Cell (LAC).

Furthermore, SDO-Adopted Templates from QMS for SDO and School-Based Non-Training Activities shall be followed.

For easy retrieval, all templates can be accessed thru <https://tinyurl.com/SDOPanaboLDDdesign>.

Templates attached in the drive are the following:

Annex I. SCHOOL BASED IN-SERVICE TRAINING (INSET) PLAN - This template is for the Conduct of School INSET and LAC.



Schools Division Office of Panabo City
City Hall Drive, Brgy. JP Laurel, Km 31, Panabo City
Tel. Nos. (084)823 1469, (084) 628 4066
Email: panabocity.division@deped.gov.ph



Republic of the Philippines
Department Of Education
Region XI
Schools Division of Panabo

Office of the Schools Division Superintendent

Annex II. DIVISION PROFESSIONAL DEVELOPMENT PROGRAM DESIGN- This is for the Conduct of training for teaching and teaching related personnel for division personnel only.

Annex III. TRAINING/ACTIVITY DESIGN FOR DIVISION OPDNTP AND NONTRAINING ACTIVITIES – This for the Conduct of training for non-teaching personnel and other non-training activities such as awarding, research congress, etc. from SGOD, CID, and OSDS.

Annex IV. SCHOOL BASED NON-TRAINING ACTIVITIES - This is for the Conduct of School-Based Non-Training Activities such as awarding, career guidance activities, etc.

Furthermore, other provisions stated in the said memorandum remained enforced.

For information, guidance and strict compliance of all concerned.

For inquiries and clarifications, please contact Mr. Kenneth S. Deligencia at 0947746-9493/Kenneth.deligencia@deped.gov.ph.


JINKY B. FIRMAN PhD, CESO VI
Schools Division Superintendent


RELEASED

AUG 01 2025

RECORDS SECTION, DOO PANABO CITY
BY 



Schools Division Office of Panabo City
City Hall Drive, Brgy. JP Laurel, Km 31, Panabo City
Tel. Nos. (084)823 1469, (084) 628 4066
Email: panabocity.division@deped.gov.ph



Republic of the Philippines
Department of Education

National Educators Academy of the Philippines

SCHOOL-BASED IN-SERVICE TRAINING (INSET) PLAN

*INSTRUCTIONS: Provide the details in the designated spaces as required. Indicate N/A if not applicable. **DO NOT ABBREVIATE.***

PROPOSER PROFILE

School			School ID			
School Address						
School Telephone No.	Type the office telephone no.	School Email Address		Type the office email address.		
Focal person	Type the complete name.	Email Address	Type email address.		Mobile No.	Type the mobile no.

INSET PROFILE

Give an overview of your proposed PD program by providing the following details.

Title	<i>Type here the proposed PD program title.</i>		
Rationale	<i>Discuss reasons for proposing the PD program supported by data on teachers' professional development needs, relevant research, and legal basis (if any).</i>		
Program Description	<i>Describe briefly the proposed PD program/course highlighting its focus content and state in behavioral terms the program objectives.</i> <i>Results objective: As a result of the participants' improved competence and performance:</i> <i>Application objective: Back in the classroom, the participants will be able to:</i> <i>Terminal objective: By the end of the 3-day training, the participants will be able to:</i> <i>Enabling objectives: Specifically, the participants will be able to: (state the key knowledge, skills, and attitude participants are expected to gain from the training)</i>		
Focus Professional Standard with specific	Professional Standard	<i>E.g., PPST</i>	
	Domain/s	Strand/s	Indicator/s

Domain/s, Strand/s, and Indicator/s	1. Content Knowledge and Pedagogy	1.2 Research-based knowledge and principles of teaching and learning	1.2.1 Demonstrate an understanding of research-based knowledge and principles of teaching and learning.
Target Participants	<p>Participants Profile: <i>Specify the target participants based on their career stage, job group, position, subject area, grade level, etc.</i></p>		
	Total number of participants, sex and age disaggregation		
Delivery Platform	Indicate the delivery platform here.	Indicative Dates of Implementation	

INSET CONTENT DETAILS

	Duration	Session Objectives	Topic	Methodology	Assessment Strategies & Tools	Outputs	Resource Speaker/Subject-Matter Expert
1		State in behavioral terms what participants will be able to do right after a learning session.	List content areas essential to attaining the learning objectives (producing the outputs).	Indicate the activities through which resource speaker will deliver content and engage the participants.	Indicate the use of varied formative and summative assessments and the applicable tools.	Identify concrete outputs (e.g., recommendations, lesson exemplars, proposals, TA plan, reflection journal, instructional material, etc.) that will be produced by the participants during and by the end of each session.	Indicate the appropriate resource speakers/subject-matter experts who will deliver the session.

				<i>be used to support the delivery of content and the attainment of the session objectives.</i>			
2	<i>Type here.</i>	<i>Type here.</i>	<i>Type here.</i>	<i>Type here.</i>	<i>Type here.</i>	<i>Type here.</i>	<i>Type here.</i>
3	<i>Type here.</i>	<i>Type here.</i>	<i>Type here.</i>	<i>Type here.</i>	<i>Type here.</i>	<i>Type here.</i>	<i>Type here.</i>

BUDGET ESTIMATE PLAN

Funding Source	<i>How will the program be funded?</i>	Budget Requirements	<i>Provide details on how the funds will be allocated. If registration, how much will be collected in each course? Use attached budget estimate template as reference.</i>

MONITORING AND EVALUATION PLAN

This is the form for the M&E Plan following the Kirkpatrick Evaluation Model.

Level of M&E	Objectives	Methods and Tools	Data Sources	Schedule of M&E	Person/s Responsible	Support Needed	User of M&E Data
Results	<i>What will be measured?</i>	<i>What methods/tools will be used to collect data?</i>	<i>Who and/or what documents will provide data or evidence on the indicators?</i>	<i>When will M&E activities be undertaken?</i>	<i>Who will be accountable for ensuring that M&E activities are done?</i>	<i>What resources are needed to implement M&E activities?</i>	<i>Who will use the data gathered?</i>
Behavior	<i>Type here.</i>	<i>Type here.</i>	<i>Type here.</i>	<i>Type here.</i>	<i>Type here.</i>	<i>Type here.</i>	<i>Type here.</i>
Learning	<i>Type here.</i>	<i>Type here.</i>	<i>Type here.</i>	<i>Type here.</i>	<i>Type here.</i>	<i>Type here.</i>	<i>Type here.</i>
Reaction	<i>Type here.</i>	<i>Type here.</i>	<i>Type here.</i>	<i>Type here.</i>	<i>Type here.</i>	<i>Type here.</i>	<i>Type here.</i>

Declaration:

I hereby declare the information provided in this application is true and correct and there have been no misleading statements, omission of any relevant facts nor any misinterpretation made.

I agree DepEd-National Educators Academy of the Philippines to be the co-owner of all the data gathered and the copyright of any publication of the use of these data

To be signed by the PD Program Proponent/s:

Program Proponent	Type here
Signature	Sign here
Date	Type here

This Form is not valid if not signed.

Prepared by:

TEACHER/SCHOOL HEAD

Position:

Date:

Noted by:

If the PD design is LAC- the signatories as program owner should be the Div. LAC Coor and Learning Specialist – (identified one content specific)

But if the PD is INSET (not LAC) and content specific to one learning area, include only the specific learning specialist as program owner.

NAME

Position: Program Owner

Date:

NAME

Position: PSDS

Date:

JANWARIO E. YAMOTA

Position: Chief, CID

Date:

AILENE B. ANONUEVO, PHD

Position: Chief, SGOD

Date:

If the activity is training: LAC/INSET, both chiefs, the CID and SGOD must be included.

Recommending Approval as to Purpose:

BASILIO P. MANA-AY JR., CESO VI

Assistant Schools Division Superintendent

Date:

Reviewed by:

KENNETH S. DELIGENCIA

Human Resource Development

Date:

RONMAR V. JAYOMA

School Mgt. Monitoring & Evaluation

Date:

Recommending Approval as to Content & Availability of Fund:

ROSLIE D. ESTIMADA

AO V – Budget Officer

Date:

Approved for Deliberation:

JINKY B. FIRMAN PhD, CESO VI

Schools Division Superintendent

Date:

PD Program Title: School-based Training of Teachers on Inclusive and Responsive Teaching Strategies: Adaption of the Universal Design for Learning (UDL) (SAMPLE ONLY!)

Prepared by:

IAN REGGY B. PARING
LAC Coordinator/Program Owner
Date:

MANUEL M. ESPERANZA
Principal III/Program Owner
Date:

Noted by:

JAIME C. CARLOM
Division SNED Coordinator
Date:

JANWARIO E. YAMOTA
Position: Chief, CID
Date:

NENITA G. TUAZON
Division LAC Coordinator
Date:

AILENE B. ANONUEVO, PHD
Position: Chief, SGOD
Date:

ABELINO D. BITANG, EdD
Position: PSDS
Date:

Recommending Approval as to Purpose:

BASILIO P. MANA-AY JR., CESO VI
Assistant Schools Division Superintendent
Date:



Reviewed by:

KENNETH S. DELIGENCIA
Human Resource Development
Date:

RONMAR V. JAYOMA
School Mgt. Monitoring & Evaluation
Date:

Recommending Approval as to Content & Availability of Fund:

ROSALIE D. ESTIMADA
AO V – Budget Officer
Date:

Approved for Deliberation:

JINKY B. FIRMAN PhD, CESO VI
Schools Division Superintendent



Republic of the Philippines
Department of Education

National Educators Academy of the Philippines

Detailed Professional Development Program Design Form

*INSTRUCTIONS: Provide the details in the designated spaces as required. Indicate N/A if not applicable. **DO NOT ABBREVIATE.***

PROFESSIONAL DEVELOPMENT (PD) PROGRAM PROVIDER PROFILE

PD Program Owner					
Complete Office Address	<i>Type the complete office address.</i>				
Office Telephone No.	<i>Type the office telephone no.</i>	Office Email Address	<i>Type the office email address.</i>		
PD Program Manager	<i>Type the complete name.</i>	Email Address	<i>Type email address.</i>	Mobile No.	<i>Type the mobile no.</i>

PD PROGRAM PROFILE

Give an overview of your proposed PD program by providing the following details.

Title	<i>Type the proposed PD program title.</i>
Rationale	<p><i>Discuss in no more than 600 words the reasons for proposing this PD program. A substantially written rationale shall capture the following:</i></p> <ul style="list-style-type: none"><i>a. The context of the PDNA conducted: where, when, and how it was conducted.</i><i>b. The significant results of the PDNA: specific target competencies for development.</i><i>c. Relevant legal bases (if applicable) such as but not limited to DepEd issuances supporting the need for the proposed PD program.</i><i>d. Relevant local and international literature validating the identified PD needs and the selected key contents and methodologies.</i>
Program Description	<p><i>State in no more than 350 words the main intention of the proposed PD program highlighting the key content to be delivered, knowledge and skills to be learned and how they will benefit the participants.</i></p>
Program Objectives	<p><i>State the following learning objectives:</i></p> <p>Results objective: As a results of the participants' improved competence and performance: <i>(State what the program will be able to contribute to the attainment of organization goals as a result of participants' improved competency and performance.)</i></p>
	<p>Application objective: Back in the workplace, the participants will be able to: <i>(State what the participants will be able to perform back in their workplace as a result of their improved competence.)</i></p>
	<p>Terminal objective: By the end of the PD program, the participants will be able to: <i>(State what the participants will be able to do immediately after the PD program.)</i></p>

<p>Enabling objectives: Specifically, the participants will be able to:</p> <p><i>(Identify major learning blocks or modules. Each block or module shall focus on enabling knowledge or skill/s participants should acquire in order to attain the terminal objective. State in specific behavioral terms what participants will be able to do by the end of each learning block or module.)</i></p>						
<p>Target Professional Standard with specific Domain/s, Strand/s, and Indicator/s</p>	<p>Professional Standard</p> <p>E.g., PPST</p>					
	<p>Domain/s</p> <p>1. Content Knowledge and Pedagogy</p>	<p>Strand/s</p> <p>1.2 Research-based knowledge and principles of teaching and learning</p>		<p>Indicator/s</p> <p>1.2.1 Demonstrate an understanding of research-based knowledge and principles of teaching and learning.</p> <p>1.2.2 Use research-based knowledge and principles of teaching and learning to enhance professional practice.</p>		
<p>Target Participants</p>	<p>Participants Profile:</p> <p>Specify the target participants based on their career stage, job group, position, subject area, grade level, etc. Indicate your participants' selection criteria.</p>					
	<p>Total number of target participants:</p>	<p>How many participants does this PD program proposal plan to cater?</p>	<p>Number of batches per implementation (if applicable):</p>	<p>To how many batches do you plan to deliver this PD program proposal?</p>	<p>Number of implementations:</p>	<p>How many times do you plan to implement this PD program proposal?</p>
<p>Delivery Platform</p>	<p>Indicate the delivery platform here.</p>		<p>Indicative Dates of Implementation</p>		<p>From Start Date to End Date</p>	

PD PROGRAM DESIGN

Session No.	Duration	Topic	Session Objectives	Methodology	Outputs	Resource Speaker/Subject-Matter Expert
Indicate session number.	Determine time allocation for each session, considering the session objective/s and output to be accomplished.	List content areas essential to attaining the learning objectives (producing the outputs).	State in behavioral terms what participants will be able to do right after a learning session.	Describe in detail or step-by-step procedure how the assigned resource speaker will deliver content and engage the learners. Indicate the relevant learning resources that will be used to support the delivery of content and the attainment of the session objectives.	Identify concrete outputs (e.g., recommendations, lesson exemplars, proposals, TA plan, reflection journal, instructional material, etc.) that will be produced by the participants during and by the end of each session.	Indicate the appropriate resource speakers/ subject-matter experts who will deliver the session.
2	Type here.	Type here.	Type here.	Type here.	Type here.	Type here.
3	Type here.	Type here.	Type here.	Type here.	Type here.	Type here.
4	Type here.	Type here.	Type here.	Type here.	Type here.	Type here.

PD Program Management Team

PD Program Management Team	Name
a. Program Manager	
b. Learning Manager	
c. Resource Speaker/Subject-Matter Expert	
d. M&E Coordinator	
e. Documenter	
f. Secretariat	
g. Welfare Officer	
h. Logistics Officer	
i. Finance Officer	

Declaration:

I hereby declare the information provided in this application is true and correct and there have been no misleading statements, omission of any relevant facts nor any misinterpretation made.

I agree that the DepEd-National Educators Academy of the Philippines to be the co-owner of all the data gathered and the copyright of any publication of the use of these data.

To be signed by the PD Program Manager

Program Manager	Type here
Signature	Sign here

Date

Click here to enter a date.

This Form is not valid if not signed

Monitoring and Evaluation (M&E) Plan Form

This is the form for the M&E Plan following the Kirkpatrick Evaluation Model.

Level of M&E	Objectives	Methods and Tools	Data Sources	Schedule of M&E	Person/s Responsible	Support Needed	User of M&E Data
Level 4 - Results <i>(The degree to which targeted outcomes as a result of the training and support and accountability package.)</i>	What will be measured?	What methods/tools will be used to collect data?	Who and/or what documents will provide data or evidence on the indicators?	When will M&E activities be undertaken?	Who will be accountable for ensuring that M&E activities are done?	What resources are needed to implement M&E activities?	Who will use the data gathered?

<p>Level 3 - Behavior</p> <p><i>(The degree to which participants apply what they learned during training when they are back on the job. This can be found in the application objective.)</i></p>						
<p>Level 2 - Learning</p> <p><i>(The degree to which participants acquire the intended knowledge, skills, attitude, confidence, and commitment based on their participation in the training.)</i></p>						

Level 1 – Reaction <i>(The degree to which participants find the training favorable, engaging, and relevant to their jobs.)</i>							
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Declaration:

I hereby declare the information provided in this application is true and correct and there have been no misleading statements, omission of any relevant facts nor any misinterpretation made.

I agree that the DepEd-National Educators Academy of the Philippines to be the co-owner of all the data gathered and the copyright of any publication of the use of these data.

To be signed by the PD Program Manager

Program Manager	Type here
Signature	Sign here
Date	Click here to enter a date.

This Form is not valid if not signed.

Prepared by:

Program Owner

Position:

Date:

Noted by:

JANWARIO E. YAMOTA

Position: Chief CID

Date:

AILENE B. ANONUEVO, PhD

Position: Chief SGOD

Date:

Recommending Approval as to Purpose:

BASILIO P. MANA-AY JR, CESO VI

Assistant Schools Division Superintendent

Date:

Reviewed by:

Recommending Approval as to Content & Availability of Fund:

KENNETH S. DELIGENCIA

Human Resource Development

Date:

RONMAR V. JAYOMA

School Mgt. Monitoring & Evaluation

Date:

ROSALIE D. ESTIMADA

AO V – Budget Officer

Date:

Approved for Deliberation:

JINKY B. FIRMAN PhD, CESO VI

Schools Division Superintendent

Date:



Republic of the Philippines
Department of Education
 NAME OF STRAND/REGION/SDO/SCHOOL

**Organizational and Professional Development for Non-Teaching Personnel (OPDNTP)
 and/or Non-Training Activities**
COLLECTIVE ACTIVITY PROPOSAL FOR FY <year>

PROPOSER OFFICE:

(Please indicate the Complete Office Title (Division, Strand), Program Manager/Focal and contact no.)

PROGRAM NAME:

(Program Area wherein the Activities are included)

AMOUNT REQUESTED:

(Total Amount of the all the proposed activities of the Program charged to OPDNTP fund)

I. RATIONALE:

Briefly state your office mandate and its need to implement Organizational and Professional Development for Non-Teaching Personnel (OPDNTP) programs, activities, and projects.

II. PROPOSED OPDNTP ACTIVITIES FOR FY 2021

***Note: Arrange the order of your activities from most priority to least priority**

A. (Title of Activity)

(The title should clearly state the type of activity. Is it a project, training, workshop, meeting, etc.?)

E.g. Training on Technical Presentation and Activity Facilitation Skills

A.1. Date of Conduct:

Indicate the dates of the activity from first to last day. For one-day activity, include time duration.

E.g. January 7-10, 2020

A.2. Duration of Activity:

Indicate the number of full days or number of hours for less than one-day activity.

E.g. Three full days

A.3. Venue/Platform:

Indicate preferred city and province.
 E.g. Tagaytay City, Cavite

Or the Platform to be used for online activity

E.g. Zoom, MTeams, google meet

A.4. Target Participants:

Specify the nature and total number of participants, Facilitators, RPs.

E.g.

40 Administrative Technical Staff of BHROD; 2 Resource Persons

A.5. Activity Rationale:

- Why the need to conduct the activity??
- How does the activity advance /support the office or organization's priorities (based on Strategic Reform Agenda, Thrusts and Directions, etc.)
- What identified operational and learning needs will the activity address?
- What are the desired results of this activity/project?

A.6. Objective:

- State the general goal of the activity and the specific objectives that are stated with SMART indicators (Specific, Measurable w/Measurement, Achievable, Relevant, Time-Oriented).

E.g.

This three-day training aims to provide appropriate knowledge, skills, and attitude for the participants to be able to:

Address:

Telephone Nos.:

Email Address:

Website:

REGION/
SDO/
SCHOOL
LOGO

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Effectivity	09.20.21	Page	1 of 3

QMS
LOG
O

1. *Discuss....*
2. *Identify...*
3. *Demonstrate....*

A.7. Expected Output:

- Outputs are those results which are achieved immediately after implementing an activity. This may be reflected on the activity documentation report and activity evaluation report.

E.g. Manual on...

A.8. Methodology:

- State how the activity will run with the given design. (Time, Activities, Responsible Persons, Method)

A.9. Resource Requirement

- Workforce needed (who will serve as secretariat, facilitator, program manager, documenter, Resource Persons, etc)
- Materials needed
- Logistical Requirements

A.10. Budgetary Requirement

Batch	No. of Pax	EXPENSES				TOTAL
		Supplies	Travel	Honorarium	Contingency	

- *input as indicated in your draft Expenditure Matrix*
- *you may delete expenses column that are not applicable or change to applicable expense (eg. expenses: Board and lodging, communication expenses, supplies, etc.)*

B. (Title of Activity)

B.1. Date of Conduct: B.2. Duration of Activity:

B.3. Venue/Platform: B.4. Target Participants:

B.5. Activity Rationale:

B.6. Objective:

B.7. Expected Output:

B.8. Methodology:

B.9. Resource Requirement

B.10. Budgetary Requirement

Batch	No. of Pax	EXPENSES				TOTAL
		Supplies	Travel	Honorarium	Contingency	

*Add columns for additional activities



Address:

Telephone Nos.:

Email Address:

Website:

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Prepared by:

(Program Owner)

Position

Date:

Noted by:

(Head of the Functional Division)

Chief/Head of Office

Date:

Recommending Approval as to Purpose:

BASILIO P. MANA-AY JR, CESO VI

Assistant Schools Division Superintendent

Date:

Reviewed by:

Recommending Approval as to Content & Availability of Fund:

KENNETH S. DELIGENCIA

Human Resource Development

Date:

ROSALIE D. ESTIMADA

AO V – Budget Officer

Date

Approved for Deliberation:

JINKY B. FIRMAN PhD, CESO VI

Schools Division Superintendent

Date:



Address:

Telephone Nos.:

Email Address:

Website:

Doc. Ref. Code	PAWIM-F-016	Rev	00
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Republic of the Philippines
Department of Education
 NAME OF STRAND/REGION/SDO/SCHOOL

SCHOOL BASED-PROGRAMS (NON-TRAINING ACTIVITIES)
COLLECTIVE ACTIVITY PROPOSAL FOR FY <year>

PROPOSER OFFICE: (Please indicate the Complete Office Title (Division, Strand), Program Manager/Focal and contact no.)
PROGRAM NAME: (Program Area wherein the Activities are included)
AMOUNT REQUESTED: (Total Amount of the all the proposed activities of the Program charged to OPDNTP fund)
I. RATIONALE: Briefly state your office mandate and its need to implement Organizational and Professional Development for Non-Teaching Personnel (OPDNTP) programs, activities, and projects.

II. PROPOSED OPDNTP ACTIVITIES FOR FY 2021 <i>*Note: Arrange the order of your activities from most priority to least priority</i>	
<p>A. (Title of Activity) <i>(The title should clearly state the type of activity. Is it a project, training, workshop, meeting, etc.?)</i> <i>E.g. Training on Technical Presentation and Activity Facilitation Skills</i></p>	
A.1. Date of Conduct: <i>Indicate the dates of the activity from first to last day. For one-day activity, include time duration.</i> <i>E.g. January 7-10, 2020</i>	A.2. Duration of Activity: <i>Indicate the number of full days or number of hours for less than one-day activity.</i> <i>E.g. Three full days</i>
A.3. Venue/Platform: <i>Indicate preferred city and province.</i> <i>E.g. Tagaytay City, Cavite</i> <i>Or the Platform to be used for online activity</i> <i>E.g. Zoom, MSTEams, google meet</i>	A.4. Target Participants: <i>Specify the nature and total number of participants, Facilitators, RPs.</i> <i>E.g.</i> <i>40 Administrative Technical Staff of BHROD; 2 Resource Persons</i>
<p>A.5. Activity Rationale:</p> <ul style="list-style-type: none"> -Why the need to conduct the activity?? -How does the activity advance /support the office or organization's priorities (based on Strategic Reform Agenda, Thursts and Directions, etc. -What identified operational and learning needs will the activity address? -What are the desired results of this activity/project? 	
<p>A.6. Objective:</p> <ul style="list-style-type: none"> - State the general goal of the activity and the specific objectives that are stated with SMART indicators (Specific, Measurable w/Measurement, Achievable, Relevant, Time-Oriented). <p><i>E.g.</i> <i>This three-day training aims to provide appropriate knowledge, skills, and attitude for the participants to be able to:</i></p> <ol style="list-style-type: none"> 1. Discuss.... 	



Address:
Telephone Nos.:
Email Address:
Website:



2. Identify...
3. Demonstrate....

A.7. Expected Output:

- Outputs are those results which are achieved immediately after implementing an activity. This may be reflected on the activity documentation report and activity evaluation report.

E.g. Manual on...

A.8. Methodology:

- State how the activity will run with the given design. (Time, Activities, Responsible Persons, Method)

A.9. Resource Requirement

- Workforce needed (who will serve as secretariat, facilitator, program manager, documenter, Resource Persons, etc)
- Materials needed
- Logistical Requirements

A.10. Budgetary Requirement

Batch	No. of Pax	EXPENSES				TOTAL
		Supplies	Travel	Honorarium	Contingency	

- *input as indicated in your draft Expenditure Matrix*
- *you may delete expenses column that are not applicable or change to applicable expense (eg. expenses: Board and lodging, communication expenses, supplies, etc.)*

B. (Title of Activity)

B.1. Date of Conduct: B.2. Duration of Activity:

B.3. Venue/Platform: B.4. Target Participants:

B.5. Activity Rationale:

B.6. Objective:

B.7. Expected Output:

B.8. Methodology:

B.9. Resource Requirement

B.10. Budgetary Requirement

Batch	No. of Pax	EXPENSES				TOTAL
		Supplies	Travel	Honorarium	Contingency	

*Add columns for additional activities



Address:

Telephone Nos.:

Email Address:

Website:



Prepared by:

TEACHER

Position:

Date:

SCHOOL HEAD

Position:

Date:

Noted by:

Program Owner

Position: Division Focal

Date:

Name

Position: PSDS

Date:

If the activity is curriculum related, the signatory is chief Janwario. If it is governance, chief Ailene is the signatory.

AILENE/JANWARIO E. YAMOTA

Chief/Head of Office

Date:

Recommending Approval as to Purpose:

BASILIO P. MANA-AY JR., CESO VI

Assistant Schools Division Superintendent

Date:

Reviewed by:

KENNETH S. DELIGENCIA

Human Resource Development

Date:

Recommending Approval as to Content & Availability of Fund:

ROSALIE D. ESTIMADA

AO V – Budget Officer

Date

Approved for Deliberation:

JINKY B. FIRMAN PhD, CESO VI

Schools Division Superintendent

Date:



Address:

Telephone Nos.:

Email Address:

Website:

