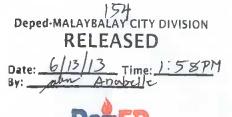


Department Of Education Region X- Northern Mindanao DIVISION OF MALAYBALAY CITY City of Malaybalay Tel # 813-2894



DIVISION MEMORANDUM No. 49 S. 2 0 1 3

FOR:

Education Program Supervisors Designate

Division Program Coordinators Public Schools District Supervisors Elementary Schools Principals

This Division

FROM:

EDILBERTO L. OPLENARIA

Schools Division Superintendent

RE

SUBMISSION OF KINDERGARTEN ENROLMENT REPORT FORMS

ON KINDERGARTEN REGULAR PROGRAM (kRP) and KINDERGARTEN

VOLUNTEER PROGRAM (KVP)

DATE:

June 11, 2013

- 1. Pursuant to DepEd Order Nos. 37 and 51, s. 2011 entitled "Policies and Guidelines on the Implementation of the Universal Kindergarten Education for 2011-2012, you are hereby directed to Re: Submission of kindergarten enrolment report form on kindergarten Regular Program (kRP) and kindergarten Volunteer Program (kVP) for funds allocation. Please submit in Soft and hard copies, Attention: Mr. Paul John Arias, Planning Officer II not later than June 17, 2013. Failure to comply the given reports denote no funds allocation.
- 2. Enclosed are the following forms: Form 2a, Form 2b and Form 2c. You may download the forms in DepEd Order No. 95 s.2011
- 3. Immediate dissemination of and strict compliance with this Division Memorandum is directed.

ELO/Impall

## School Kindergarten Enrolment Report Form School Year \_\_\_\_\_

| Region                   |                   | inflavor.      | Division |                             |                       |         |        |  |  |  |  |  |  |  |
|--------------------------|-------------------|----------------|----------|-----------------------------|-----------------------|---------|--------|--|--|--|--|--|--|--|
| School                   |                   |                | District |                             |                       |         |        |  |  |  |  |  |  |  |
|                          | Name of Pupil     |                | Ger      | nder                        |                       |         |        |  |  |  |  |  |  |  |
| Last Name                | First Name        | Middle Initial | Male     | Female                      | Date of Birth         | Age     | Remark |  |  |  |  |  |  |  |
|                          |                   |                |          |                             |                       |         |        |  |  |  |  |  |  |  |
| Note: Use additional she | eet if necessary. |                |          |                             |                       | L       |        |  |  |  |  |  |  |  |
| Prepared by:             |                   |                |          |                             | Certified true and Co | orrect: |        |  |  |  |  |  |  |  |
| Teach                    | er                |                |          | -                           | l Head                |         |        |  |  |  |  |  |  |  |
| Signature over P         |                   |                |          | Signature over Printed Name |                       |         |        |  |  |  |  |  |  |  |
| Date:                    |                   |                |          |                             |                       |         |        |  |  |  |  |  |  |  |

cc: Regional DepED Office

Central DepED Office - electronic file in excel format thru preschool.bee@gmail.com

(Enclosure No. 2b to DepEd Order No. 95, s. 2011)

## **DIVISION SUMMARY REPORT ON KINDERGARTEN REGULAR PROGRAM (KRP)** Division: Region: KINDERGARTEN TEACHER'S INFORMATION REMARKS ENROLMENT CLASSROOM STATUS (indicate if NUMBER NAME OF TEACHER SCHOOL ID SCHOOL ADDRESS NO. DISTRICT YEAR IN DATE OF AGAPP OLD/MAKE with ECE ELIGIBILTY NEW QF Total UNITS/M.A. SERVICE APPOINTMENT SHIFT CLASSES trainings) 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 TOTAL Note: Please indicate grand total per column and use additional sheets if necessary. Certified true and correct: Prepared by: Signature over printed name Signature over printed name Designation Designation

cc: Regional DepED Office

Date: \_\_\_\_

Central DepED Office electronic file in excel format thru preschool.bee@gmail.com

(Enclosure No. 2c to DepEd Order No. 95, s. 2011)

| Divisio        | on:                         |           |                   | nda.     |                 |                                    |            |                    | Region:                     |                                   |                  |           |                   |                         |           |          |       |                                      |
|----------------|-----------------------------|-----------|-------------------|----------|-----------------|------------------------------------|------------|--------------------|-----------------------------|-----------------------------------|------------------|-----------|-------------------|-------------------------|-----------|----------|-------|--------------------------------------|
|                |                             |           |                   |          |                 | KINDERGARTEN TEACHER'S INFORMATION |            |                    |                             |                                   | CLASSROOM STATUS |           |                   |                         | ENROLMENT |          |       | REMARKS(I                            |
| NO.            | DISTRICT                    | SCHOOL ID | SCHOOL            | ADDRESS  | NAME OF TEACHER | AGE                                | ELIGIBILTY | YEAR IN<br>SERVICE | ECE<br>UNITS/M.A.<br>EARNED | DATE OF<br>CONTRACT OF<br>SERVICE | NEW              | AGAPP     | OLD/MAKE<br>SHIFT | NUMBER<br>OF<br>CLASSES | M         | F        | Total | ndicate if<br>with ECE<br>trainings) |
| 1              |                             |           |                   |          |                 |                                    |            |                    |                             |                                   |                  |           |                   |                         |           |          |       |                                      |
| 2              |                             |           |                   |          |                 |                                    |            |                    |                             |                                   |                  |           |                   |                         |           |          |       |                                      |
| 3              |                             |           |                   |          |                 |                                    |            |                    |                             |                                   |                  |           |                   |                         |           |          |       |                                      |
| 4              |                             |           |                   |          |                 |                                    |            |                    |                             |                                   |                  |           |                   |                         |           |          |       |                                      |
| 5              |                             |           |                   |          |                 |                                    |            |                    |                             |                                   |                  |           |                   |                         |           |          |       |                                      |
| 6              |                             |           |                   | -        |                 |                                    |            |                    |                             |                                   |                  |           |                   |                         |           | Ĺ        |       |                                      |
| 7              |                             |           |                   |          |                 |                                    |            |                    |                             |                                   |                  |           |                   |                         |           |          |       |                                      |
| 8              |                             |           |                   |          |                 |                                    |            |                    |                             |                                   |                  |           |                   |                         |           |          |       |                                      |
| 9              |                             |           |                   |          |                 |                                    |            |                    |                             |                                   |                  |           |                   |                         |           |          |       |                                      |
| 10<br>11<br>12 |                             |           |                   |          |                 |                                    |            |                    |                             |                                   | L                | L         |                   |                         |           |          |       |                                      |
| 11             |                             |           |                   | 1        |                 |                                    |            |                    |                             |                                   |                  |           |                   |                         |           |          |       |                                      |
| 12             |                             |           |                   |          |                 | 1                                  |            |                    |                             |                                   |                  |           |                   |                         |           |          |       |                                      |
| 13<br>14<br>15 |                             |           |                   |          |                 |                                    |            |                    |                             |                                   |                  |           |                   |                         |           |          |       |                                      |
| 14             |                             |           |                   |          |                 |                                    |            |                    |                             |                                   |                  |           |                   |                         |           |          |       |                                      |
| 15             |                             | 1         |                   |          |                 |                                    |            |                    |                             |                                   |                  |           |                   |                         |           | <u> </u> |       |                                      |
|                | TOTAL                       |           |                   | <u> </u> |                 |                                    |            |                    |                             |                                   |                  |           |                   |                         |           |          |       |                                      |
|                | Please indicate             |           | column and use ad |          | ecessary.       |                                    |            |                    |                             |                                   | Certifie         | d true an | d correct:        |                         |           |          |       |                                      |
|                | Signature over printed name |           |                   |          |                 |                                    |            |                    | Signature over printed name |                                   |                  |           |                   |                         |           |          |       |                                      |
|                |                             |           | Designation       |          |                 |                                    |            |                    |                             |                                   |                  | De        | signation         |                         |           |          |       |                                      |
| Date:          |                             |           |                   | <u> </u> |                 |                                    |            |                    |                             |                                   |                  |           |                   |                         |           |          |       |                                      |

DIVISION SUMMARY REPORT ON KINDERGARTEN VOLUNTEER PROGRAM (KVP)

cc: Regional DepED Office

Central DepED Office - electronic file in excel format thru preschool.bee@gmail.com