



APR 04 2016

DIVISION MEMORANDUM

No. 166, s. 2016

TEACHERS' YEAR-END CLEARANCE

To: **District Supervisors/OICs**
Central School Principals
Secondary Lead School Principals

1. The field is hereby reminded of the indispensability of the compliance of the Year-End Teachers' Clearance for SY 2015-2016 which is mandated under the Civil Service Manual quoted hereunder:

"336. The accomplishment of BPS Form No. 122 (Teachers Clearance) should also be required of all National (Insular and Provincial Teachers) at the close of each school year, regardless of whether or not they go on leave."

"339. Before allowing final salary payment to any teacher, upon his resignation, or transfer, or extended leave (60 days or more), or at the end of the school year, the clearance showing that he is cleared of all property and money responsibility must be submitted."

2. The Public Schools District Supervisors, District OICs, School Principals and School Heads are likewise directed to accomplish, as part of their year-end clearance, division forms hereto attached.

3. Be informed that non-compliance of the Year-End Clearance will constrain this Office to hold the release of the Proportional Vacation Pay (PVP) and/or the salary for the month of May.

4. The list of teachers who have complied, as well as those who have not complied with this Memorandum, shall be submitted to this Office on or before May 5, 2016, by the PSDS or District OIC for elementary, and School Principal or School Heads for secondary.

5. Wide dissemination of this Memorandum is encouraged and its strict compliance is required.


RHEA MARA ANGTUD, ED. D.
Schools Division Superintendent



Republic of the Philippines
Department of Education Culture and Sports
Region VII, Central Visayas
Division of Cebu
Cebu City

Certificate of Tree Growing

This is to certify that **Juan Dela Cruz**, has grown **ten (10)** trees in **Barangay Bagong Lipunan, Consolacion Cebu**, as a requirement for promotional purposes, school year 2016 – 2017.

Issued this 9th day of March, 2016.

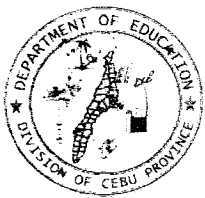
School NGP Coordinator

District NGP Coordinator

District Supervisor

Noted:

Picture, location



CERTIFICATION

To Whom It May Concern:

This is to certify that _____, _____,
(Name) (Position)
 _____, _____,
(School/District) (Address)

Cebu has submitted the liquidations for the following funds:

- MOOE Downloading _____
- DICP 2014 _____
- DICP 2015 _____
- GULAYAN SA PAARALAN _____
- SPED _____
- SBM _____
- SCHOOL BASED FEEDING PROGRAM _____
- CAREER GUIDANCE ADVOCACY PROGRAM _____
- DIVISION OFFICE CASH ADVANCES _____

This is issued upon the request of the interested party for whatever purpose it may serve him/her best.

Given this ____ day of _____ 2016 in DepED Division of Cebu Province, Sudlon, Lahug, Cebu City.

LOVELLA M. PERALES
 OIC-Accounting Section

School: _____
 District: _____

Name of School Head: _____
 Name of First Aid Teacher: _____

**Checklist for School Heads/First Aid Teachers on Health Reports Year End Clearance
 SY 2015 – 2016**

- 1. Folder – **Consolidated Nutritional Status Report (Baseline)** ----- ()
 - Attach supporting documents by Grade level ----- ()
 - Computation sheet by grade level ----- ()
 - List of undernourished children by grade level ----- ()
- Folder – **Consolidated Nutritional Status Report (Endline)** ----- ()
 - Attach supporting documents by Grade level ----- ()
 - Computation sheet by grade level ----- ()
 - List of undernourished children by grade level ----- ()
- 2. Folder – **First Dose Deworming Report** ----- ()
 - Consolidated by grade level ----- ()
 - Attach supporting documents by Grade Level (List of Pupils – June, 2015) ----- ()
- Folder – **Second Dose Deworming Report** ----- ()
 - Consolidated by grade level ----- ()
 - Attach supporting documents by Grade Level (List of Pupils-January, 2016) ----- ()
- 3. Folder – **Consolidated Nutritional Status for 4 Ps Recipients (Baseline)** ----- ()
 - Attach List of Pupils by grade level ----- ()
 - List of Undernourished 4Ps children ----- ()
- 4. Folder – **Consolidated Nutritional Status for 4 Ps Recipients (Endline)** ----- ()
 - Attach List of Pupils by Grade level ----- ()
 - List of Undernourished 4Ps children ----- ()
- 5. Folder - **First Dose 4Ps Deworming Report** ----- ()
 - Attach List of 4 Ps Pupils Dewormed ----- ()
- 6. Folder – **Second Dose 4Ps Deworming Report** ----- ()
 - Attach List of 4Ps Pupils Dewormed ----- ()
- 7. Folder for **ASNP Seed Money Report/ or Revolving Fund Report** ----- ()
 - Supporting documents : narrative reports; Cash on Hand; Cash flow;etc. ----- ()
- 8. **SBM Grants : Folder of Narrative report of activities like School Feeding Data; pictorials; etc.** ----- ()
- 9. Folder for **Applied Nutrition Program of Activities (ANP)** ----- ()
 - Supplementary Feeding Program by grade level: e.g. menu; feeding activities per month by grade level; attendance of parents; pictorials, etc. ----- ()
- 10. Folder for **Consolidated Visual Acuity Report (June,2015)** ----- ()
 - Attach supporting documents by Grade level ----- ()
- 11. Folder for **Administrator’s Health Supervision Report (Form 11)** ----- ()
 - Basis: Health Assessment Report of the School Nurse(Form 56);Consolidated Visual Acuity Report; Daily Treatment Record in School Clinic; Receipt of Medicine received; x-ray/urinalysis results; etc. ----- ()
- 12. Folder for **Updated Record of Daily Treatment in School Clinic (Form 59), indicating treatment given from June, 2015 to March,2016** ----- ()
- 13. Folder for **Updated Daily Classroom Health Observation Record or Special List for Teacher by Grade Level** ----- ()
 indicating Name of pupils, ailments/defects found, date found-cured starting June, 2015–March, 2016.
- 14. **Form 86(Teachers’Health Exam.Record) signed by a Govt. Physician. Attach X-ray/Urinalysis results** ----- ()
 If pregnant, sputum exam. and urinalysis.
- 15. Folder for **Dental Record of Accomplishment** ----- ()
- 16. Folder for **Dental Toothbrushing drill Record** ----- ()
- 17. Folder for **School Health Assessment Report of the School Nurse (Form 56)** ----- ()
- 18. Folder for **Medicine Supplies Received** ----- ()
- 19. Folder for **Checklist Handwashing activities by grade level** ----- ()
- 20. Folder for **Health Inspection/Exam.Record (Form 58) by Year Level (SECONDARY SCHOOLS ONLY)** ----- ()
- 21. All **Health Cards** are attached in **Form 137-E** by grade level ----- ()
- 22. Folder – **School Based Feeding Program (SBFP) Report** ----- ()
- 23. Folder for **Dengue OL Trap Report** ----- ()
- 24. Folder for **OLY set net Dengue Control Mosquitoe (Screened Classroom)Report** ----- ()
- 25. Folder for **Larviciding Program using Temephos Report** ----- ()
- 26. Folder for **Enlismment of Teaching/NTP to TSEKAP Program** ----- ()
- 27. **Health Personnel Logbook** ----- ()

FINDINGS: Lacking: 1. _____ 4. _____
 2. _____ 5. _____
 3. _____ 6. _____

CHECKED/REVIEWED:

 School Nurse II