



Republic of the Philippines
 Department of Education
 Region VII, Central Visayas
DIVISION OF CEBU PROVINCE
 IPHO BUILDING Sudlon , Lahug , Cebu City



DIVISION MEMORANDUM
 No. 491, s. 2018

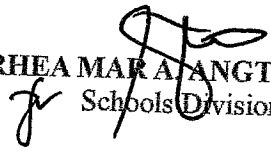
CURRICULUM IMPLEMENTATION DIVISION (CID) 3-IN-1 PROFORMA

TO : Assistant Schools Division Superintendents
 Division Chiefs
 Education Program Supervisors
 Public Schools District Supervisors
 Division Coordinators/Unit Heads
 Senior Education Program Specialists (SEPSs)/EPSAs
 Public Elementary and Secondary School Heads

- To fast track the preparation and submission of the required monthly reports in compliance with the Result-Based Performance Management System, pursuant to DepED Order No. 2, s. 2015, this Office through the Curriculum Implementation Division (CID) has designed a 3-in-1 Proforma for the CID personnel and school heads to use effective August 2018.
- The CID 3-in-1 Proforma include three major elements: **Authority to Travel, Work Plan, and Accomplishments**. See Enclosures 1 to 6 (for the month of August 2018). Use the Proforma for each month.
 - Enclosure 1. CID 3-in-1 Proforma A: Assistant Schools Division Superintendent (ASDS)
 - Enclosure 2. CID 3-in-1 Proforma B: Chief Education Supervisor (CES)
 - Enclosure 3. CID 3-in-1 Proforma C: Education Program Supervisor (EPS)
 - Enclosure 4. CID 3-in-1 Proforma D: Public Schools District Supervisor (PSDS)
 - Enclosure 5. CID 3-in-1 Proforma E: Education Program Specialist – ALS
 - Enclosure 6. CID 3-in-1 Proforma F: School Heads (SHs)
- The ASDS in-charged of CID together with the CID Chief shall facilitate the smooth transition and shall conduct coaching sessions to ensure common understanding among the Education Program Supervisors and Public Schools District Supervisors for its effective implementation
- Public Schools District Supervisors are tasked to capacitate all the school heads under their supervision to accomplish the said Proforma.
- The accomplished Proforma shall be submitted to the Office of the Schools Division Superintendent on the dates specified hereunder:

Day/s	School/s to be visited	School Head/s (To affix his/her signature over the printed name right after the conduct of the activities specified in this template)	Focused KRA/s	Objectives	Activities	Physical Target	Physical Output (please indicate the MOVs)	% of Accomplishment	Remarks
Every last week of the current month, e.g. Last week of July 2018 for August 2018 CID 3-in-1 Proforma							Every 5 th day of the preceding month together with the printed biometrics and DTR, e.g. September 5, 2018		
<i>Note: Only up to this portion shall be accomplished by the concerned personnel and be submitted on the date specified.</i>							<i>Note: Shall be accomplished at the end of each month.</i>		

6. The data reflected in the CID 3-in-1 Proforma in all levels shall be the basis for the formulation of appropriate interventions to be collaboratively deliberated by the CID personnel during the regular CID Monthly Conference.
7. Each EPS shall prepare in CD a menu of interventions/strategies responsive to the CIGPs that may be captured during the performance of the mandated functions by the PSDSs and SHs vis-à-vis in the implementation of the curriculum.
8. Wide and immediate dissemination of and strict compliance with this Memorandum is highly directed.


RHEA MARA ANGTUD, Ed.D., CESO VI
Schools Division Superintendent



Republic of the Philippines
 Department of Education
 Region VII, Central Visayas
DIVISION OF CEBU PROVINCE
 Sudlon, Lahug, Cebu City



AUTHORITY TO TRAVEL, MONTHLY WORK PLAN, AND ACCOMPLISHMENT

Month of **AUGUST**, 2018

OFFICE/DIVISION: _____

DATE ACCOMPLISHED: _____

Week 1 (August 1-3)

Day/s	Unit/District/ School/Agency to be visited	PSDS(s)/School Head(s)/Head(s) of Office <small>(To affix his/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRA/s	Objectives	Activities	Physical Targets	Physical Outputs <small>(please indicate the MOVs)</small>	% of Accomplishment	Remarks
Aug. 1					1.				
Aug. 2					2.				

Week 3 (August 13-17)

Day/s	School(s)/Agency(s) to be visited	School Head(s)/Head(s) of Office <small>(To affix his/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRA/s	Objectives	Activities	Physical Targets	Physical Outputs <small>(please indicate the MOVs)</small>	% of Accomplishment	Remarks
Aug. 10									
Aug. 13									
Aug. 14									
Aug. 15									
Aug. 16									

<u>Week 4 (August 20-24)</u>										
Day/s	School(s)/Agency(s) to be visited	School Head(s)/Head(s) of Office <small>(To affix his/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRA/s	Objectives	Activities	Physical Targets	Physical Outputs <small>(please indicate the MOVs)</small>	% of Accomplishment	Remarks	
Aug. 17										
Aug. 20										
Aug. 21										
Aug. 22										

Week 5 (August 27-31)										
Day/s	School(s)/Agency(s) to be visited	School Head(s)/Head(s) of Office <small>(To affix this/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRA/s	Objectives	Activities	Physical Targets	Physical Outputs <small>(please indicate the MOVs)</small>	% of Accomplishment	Remarks	
Aug. 23										
Aug. 24										
Aug. 27										
Aug. 28										
Aug. 29										
Aug. 30										
Aug. 31										



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AUTHORITY TO TRAVEL, MONTHLY WORK PLAN, AND ACCOMPLISHMENT
 Month of **AUGUST**, 2018

OFFICE/DIVISION: _____

DATE ACCOMPLISHED: _____

Week 1 (August 1-3)

Day/s	Unit/District/ School/Agency to be visited	PSDS/School Head/Head of Office <small>(To affix his/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRA/s	Objectives	Activities	Physical Targets	Physical Outputs <small>(please indicate the MOVs)</small>	% of Accomplishment	Remarks
Aug. 1					1.				
Aug. 2									
Aug 3									

Week 2 (August 6-10)

Day/s	Unit/District/ School/Agency to be visited	PS/PS/School Head/Head of Office <small>(To affix his/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRA/s	Objectives	Activities	Physical Target	Physical Output <small>(please indicate the MOVs)</small>	% of Accomplishment	Remarks
Aug. 6									
Aug. 7									
Aug. 8									
Aug. 9									
Aug. 10									

Week 3 (August 13-17)

Day/s	Unit/District/ School/Agency to be visited	PSDs/School Head/Head of Office <small>(To affix his/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRA/s	Objectives	Activities	Physical Target	Physical Output <small>(please indicate the MOVs)</small>	% of Accomplishment	Remarks
Aug. 13									
Aug. 14									
Aug. 15									
Aug. 16									
Aug. 17									

Week 4 (August 20-24)

Day/s	Unit/District/ School/Agency to be visited	PSDS/School Head/Head of Office <small>(To affix his/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRA/s	Objectives	Activities	Physical Targets	Physical Outputs <small>(please indicate the MOVs)</small>	% of Accomplishment	Remarks
Aug. 20									
Aug. 21									
Aug. 22									
Aug. 23									
Aug. 24									

Week 5 (August 27-31)

Day/s	Unit/District/ School/Agency to be visited	PSDS/School Head/Head of Office <small>(To affix his/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRA/s	Objectives	Activities	Physical Targets	Physical Outputs <small>(please indicate the MOVs)</small>	% of Accomplishment	Remarks
Aug. 27									
Aug. 28									
Aug. 29									
Aug. 30									
Aug. 31									

Prepared by:

Chief Education Program Supervisor, CID

Recommending Approval:

Approved:

Assistant Schools Division Superintendent, CID In-Charge

RHEA MAR A. ANGTUD, ED.D., CESO VI
Schools Division Superintendent



Republic of the Philippines
Department of Education
 Region VII, Central Visayas
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 Sudlon, Lahug, Cebu City



AUTHORITY TO TRAVEL, MONTHLY WORK PLAN, AND ACCOMPLISHMENT
 Month of **AUGUST**, 2018

OFFICE/DIVISION: _____

DATE ACCOMPLISHED: _____

Week 1 (August 1-3)

Day/s	District/School/Agency to be visited	PSDS/School Head/Head of Office <small>(To affix his/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRA/s	Objectives	Activities	Physical Targets	Physical Outputs <small>(please indicate the MOVs)</small>	% of Accomplishment	Remarks
Aug. 1					1.				
Aug. 2									
Aug 3									

Week 2 (August 6-10)

Day/s	District/School/Agency to be visited	PSDS/School Head/Head of Office <small>(To affix his/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRA/s	Objectives	Activities	Physical Targets	Physical Outputs <small>(please indicate the MOVs)</small>	% of Accomplishment	Remarks
Aug. 6									
Aug. 7									
Aug. 8									
Aug. 9									
Aug. 10									

Week 3 (August 13-17)

Day/s	District/School/Agency to be visited	PSDS/School Head/Head of Office <small>(To affix his/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRA/s	Objectives	Activities	Physical Targets	Physical Outputs <small>(please indicate the MOVs)</small>	% of Accomplishment	Remarks
Aug. 13									
Aug. 14									
Aug. 15									
Aug. 16									
Aug. 17									

Week 4 (August 20-24)

Day/s	District/School/Agency to be visited	PSDS/School Head/Head of Office <small>(To affix his/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRA/s	Objectives	Activities	Physical Targets	Physical Outputs <small>(please indicate the MOV/s)</small>	% of Accomplishment	Remarks
Aug. 20									
Aug. 21									
Aug. 22									
Aug. 23									
Aug. 24									

Week 5 (August 27-31)

Day/s	District/School/Agency to be visited	PSDS/School Head/Head of Office <small>(To affix his/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRA/s	Objectives	Activities	Physical Targets	Physical Outputs <small>(please indicate the MOV/s)</small>	% of Accomplishment	Remarks
Aug. 27									
Aug. 28									
Aug. 29									
Aug. 30									
Aug. 31									

Prepared by: _____

Education Program Supervisor

Recommending Approval: _____

Chief, Curriculum Implementation Division

Approved: _____

RHEA MAR A. ANGTUD, ED.D., CESO VI
Schools Division Superintendent



Republic of the Philippines
 Department of Education
 Region VII, Central Visayas
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 Sudlon, Lahug, Cebu City



AUTHORITY TO TRAVEL, MONTHLY WORK PLAN, AND ACCOMPLISHMENT

Month of AUGUST, 2018

DISTRICT: _____

DATE ACCOMPLISHED: _____

Week 1 (August 1-3)

Day/s	School/Agency to be visited	School Head/Head of Office <small>(To affix his/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRA/s	Objectives	Activities	Physical Targets	Physical Outputs <small>(please indicate the MOVs)</small>	% of Accomplishment	Remarks
Aug. 1	Consolacion Central School Cordova Central School		1: Instructional Supervision	Improve the competencies of SHs in conducting post conference after classroom observation	1. Meet with the SHs and discuss important points during the Class Observation 2. Observe classes with the SHs 3. Observe the SHs during the debriefing or post conference 4. Discuss what transpired during the post	2 SHs			

						conference conducted by the SHs						
Aug. 2						5. Process and engage the SHs to agree points for improvement						
Aug 3												

Week 2 (August 6-10)

Day/s	School/Agency to be visited	School Head/Head of Office <small>(To affix his/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRA/s	Objectives	Activities	Physical Targets	Physical Outputs <small>(Please indicate the MOVs)</small>	% of Accomplishment	Remarks
Aug. 6									
Aug. 7									
Aug. 8									
Aug. 9									
Aug. 10									

Week 3 (August 13-17)

Day/s	School/Agency to be visited	School Head/Head of Office <small>(To affix his/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRA/s	Objectives	Activities	Physical Targets	Physical Outputs <small>(please indicate the MOVs)</small>	% of Accomplishment	Remarks
Aug. 13									
Aug. 14									
Aug. 15									
Aug. 16									
Aug. 17									

Week 4 (August 20-24)

Day/s	School/Agency to be visited	School Head/Head of Office <small>(To affix his/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRA's	Objectives	Activities	Physical Targets	Physical Outputs <small>(please indicate the MOVs)</small>	% of Accomplishment	Remarks
Aug. 20									
Aug. 21									
Aug. 22									
Aug. 23									
Aug. 24									

Week 5 (August 27-31)

Day/s	School/Agency to be visited	School Head/Head of Office <small>(To affix his/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRA/s	Objectives	Activities	Physical Targets	Physical Outputs <small>(please indicate the MOVs)</small>	% of Accomplishment	Remarks
Aug. 27									
Aug. 28									
Aug. 29									
Aug. 30									
Aug. 31									

Prepared by: _____

Public Schools District Supervisor

Recommending Approval: _____

Approved: _____

Chief, Curriculum Implementation Division

RHEA MAR A. ANGTUD, ED.D., CESO VI
Schools Division Superintendent



Republic of the Philippines
 Department of Education
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 Sudlon, Lahug, Cebu City



AUTHORITY TO TRAVEL, MONTHLY WORK PLAN, AND ACCOMPLISHMENT
 Month of AUGUST, 2018

OFFICE/DIVISION: _____

DATE ACCOMPLISHED: _____

Week 1 (August 1-3)

Day/s	District/Learning Center/School/Agency to be visited	PSDS/ALS Implementer/School Head/Head of Office <small>(To affix his/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRA/s	Objectives	Activities	Physical Targets	Physical Outputs <small>(please indicate the MOVs)</small>	% of Accomplishment	Remarks
Aug. 1					1.				
Aug. 2									
Aug 3									

Week 2 (August 6-10)

Day/s	District/Learning Center/School/Agency to be visited	PSDS/ALS Implementer/School Head/Head of Office <small>(To affix his/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRA/s	Objectives	Activities	Physical Targets	Physical Outputs <small>(please indicate the MOVs)</small>	% of Accomplishment	Remarks
Aug. 6									
Aug. 7									
Aug. 8									
Aug. 9									
Aug. 10									

Week 3 (August 13-17)

Day/s	District/Learning Center/School/Agency to be visited	PSDs/ALS Implementer/School Head/Head of Office <small>(To affix his/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRA/s	Objectives	Activities	Physical Targets	Physical Outputs <small>(please indicate the MOVs)</small>	% of Accomplishment	Remarks
Aug. 13									
Aug. 14									
Aug. 15									
Aug. 16									
Aug. 17									

Week 4 (August 20-24)

Day/s	District/Learning Center/School/Agency to be visited	PSDS/ALS Implementer/School Head/Head of Office <small>(To affix his/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRAs	Objectives	Activities	Physical Targets	Physical Outputs <small>(please indicate the MOVs)</small>	% of Accomplishment	Remarks
Aug. 20									
Aug. 21									
Aug. 22									
Aug. 23									
Aug. 24									

Week 5 (August 27-31)

Day/s	District/Learning Center/School/Agency to be visited	PSDS/ALS Implementer/School Head/Head of Office <small>(To affix his/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRA/s	Objectives	Activities	Physical Targets	Physical Outputs <small>(please indicate the MOVs)</small>	% of Accomplishment	Remarks
Aug. 27									
Aug. 28									
Aug. 29									
Aug. 30									
Aug. 31									

Prepared by:

Education Program Specialist II-ALS

Reviewed:

Chief, Curriculum Implementation Division

Recommending Approval:

Assistant Schools Division Superintendent, In-charge of CID

Approved:

RHEA MAR A. ANGTUD, ED.D., CESO VI
Schools Division Superintendent



Republic of the Philippines
 Department of Education
 Region VII, Central Visayas
DIVISION OF CEBU PROVINCE
 Sudlon, Lahug, Cebu City



District of _____

AUTHORITY TO TRAVEL, MONTHLY WORK PLAN, AND ACCOMPLISHMENT
 Month of AUGUST, 2018

SCHOOL: _____

DATE ACCOMPLISHED: _____

Week 1 (August 1-3)

Day/s	Class/Office/Agency to be visited	Teacher/Head of Office <small>(To affix his/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRA/s	Objectives	Activities	Physical Targets	Physical Outputs <small>(please indicate the MOVs)</small>	% of Accomplishment	Remarks
Aug. 1	Grade 1, Section Mahogany		1: Instructional Supervision	Discuss appropriate strategies in teaching the 4 macro skills in reading.	1. Check DLPs 1. Research on teaching strategies in reading 2. Observe classes with the SHs 3. Conduct post conference with the teachers being observed 4. Discuss appropriate interventions and	2 teachers			
	Grade III, Section Red								

						share appropriate teaching strategies				
Aug. 2						5. Enter into agreements with the teachers				
Aug 3										

Week 2 (August 6-10)

Day/s	Class/Office/Agency to be visited	Teacher/Head of Office <small>(To affix his/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRA/s	Objectives	Activities	Physical Targets	Physical Outputs <small>(please indicate the MOVs)</small>	% of Accomplishment	Remarks
Aug. 6									
Aug. 7									
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Aug. 9									
Aug. 10									

Week 3 (August 13-17)

Day/s	Class/Office/Agency to be visited	Teacher/Head of Office <small>(To affix his/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRA/s	Objectives	Activities	Physical Targets	Physical Outputs <small>(please indicate the MOVs)</small>	% of Accomplishment	Remarks
Aug. 13									
Aug. 14									
Aug. 15									
Aug. 16									
Aug. 17									

Week 4 (August 20-24)

Day/s	Class/Office/Agency to be visited	Teacher/Head of Office <small>(To affix his/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRA/s	Objectives	Activities	Physical Targets	Physical Outputs <small>(please indicate the MOVs)</small>	% of Accomplishment	Remarks
Aug. 20									
Aug. 21									
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Aug. 23									
Aug. 24									

Week 5 (August 27-31)

Day/s	Class/Office/Agency to be visited	Teacher/Head of Office <small>(To affix his/her signature over the printed name right after the conduct of the activities specified in this template)</small>	Focused KRA/s	Objectives	Activities	Physical Targets	Physical Outputs <small>(please indicate the MOVs)</small>	% of Accomplishment	Remarks
Aug. 27									
Aug. 28									
Aug. 29									
Aug. 30									
Aug. 31									

Prepared by: _____
School Head

Recommending Approval: _____
Public Schools District Supervisor

RHEA MAR A. ANGTUD, ED.D., CESO VI
Schools Division Superintendent