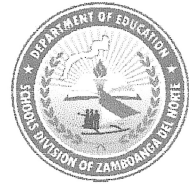




Republic of the Philippines
Department of Education
Region IX, Zamboanga Peninsula
SCHOOLS DIVISION OF ZAMBOANGA DEL NORTE
Dipolog City 7100



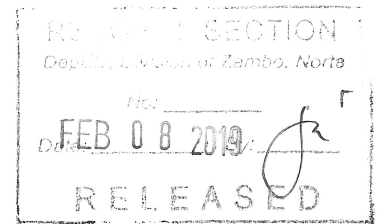
Memorandum

To : Public Schools District Supervisors
District Partnership Focal Persons
Elementary and Secondary School Heads
School Partnership Focal Persons

From : The Office of the Schools Division Superintendent

Subject : **SUBMISSION OF SCHOOL INCOME GENERATING PROJECT (IGP) PROFILE AND SCHOOL PARTNERSHIP STATUS REPORT**

Date : February 1, 2019



1. In our desire to establish a baseline data on school income generating projects and bridge the gaps on partnership and networking, this office, through the Social Mobilization and Networking Section (SMNS), hereby requests the submission of the School Income Generating Project/s Profile and School Partnership Status Report on or before February 22, 2018 to email address znsocmob@gmail.com following the herein enclosed templates:

Enclosure A – School Income Generating Project Profile; and
Enclosure B – School Partnership Status Report.
2. School Heads are expected to religiously fill in the given templates and submit afterwards to the district supervisor. The district supervisors are likewise expected to check on the completeness of the data provided in each and every column of the prescribed templates. They are further expected to compile the reports and send/forward them to the SMNS using the email provided above.
3. No school head shall be allowed to directly submit the reports to SMNS. The SMNS shall only receive thirty-five (35) reports from the district supervisors.
4. For inquiries, please contact SEPS Jessie E. Elacan and/or EPS II Doreen B. Ombalino through mobile number 0998 553 5783/0998 958 5205.
5. For strict compliance.


PEDRO MELCHOR M. NATIVIDAD, CSEE
Schools Division Superintendent

SCHOOL INCOME GENERATING PROJECT PROFILE

Name of School: _____ District: _____

Project Title			
Project Coordinator			
Project Description			
Project Work Plan			
Month and Year Started			
Start-Up Capital			
Balance Statement (As of _____)			
Cash Flow of the Last Six (6) Months			
School Activities Conducted with the Financial Support from IGP Funds	Activity	Date	Amount

Prepared

Checked and Verified

Noted

IGP Coordinator

School Head

PSDS

SCHOOL PARTNERSHIP STATUS REPORT

Name of School: _____ District: _____

Name of Partner	
Contact Person	
Contact Number	
Email Address	
Office Address	
Project Description	
Project Work Plan	
Proof of Partnership	
Length of Project	
Status <i>(Percentage of Completion)</i> of Project	

Prepared

Checked and Verified

School Partnership Focal Person

School Head

Noted

PSDS/District Partnership Focal Person