



Republic of the Philippines
Department of Education
Negros Island Region
SCHOOLS DIVISION OF DUMAGUETE CITY
Dumaguete City

RELEASED
CONTROL NO. 1018
RELEASED BY ebt
DATE RELEASED OCT 23 2017
TIME RELEASED
RECEIVED BY

October 23, 2017

UNNUMBERED MEMORANDUM

2017 SCHOOL-BASED MIDYEAR IN-SERVICE TRAINING MONITORING ASSIGNMENT


To: Chief, Curriculum Implementation Division
Chief, Schools Governance & Operations Division
Education Program Supervisors
Education Program Specialists

1. To ensure the smooth conduct of the 2017 School-Based Mid-Year INSET, the following Division Office Personnel are requested to monitor the following schools:

NAME SUPERVISOR	SCHOOL
Dr. Miraluna V. Albina	BBJBES
	CANTES
Mrs. Wenerita A. Miraflor	CCES
	CALES
Dr. Antonieta P. Vendiola	CAMES
	CNHS
	MMES
Mrs. Rosenie B. Sarana	HFGMES
	HFGMHS
	SCES
Mrs. Rhoda B. Tabares	NCES
	PHS
	JES
Dr. Merlyn B. Tamparong	ADMES
	WCES
	WCECLC
	WCSES
Dr. Jaymar T. Umbac	CADES
	BATES
	TNHS
Mrs. Sarah L. Catabay	BALES
	CANDES
Dr. Nelson A. Caday	DCHS
	JNHS
	RTPM-DSHS

2. An accomplishment report shall be submitted to this Office(Attn: Mrs. Joesan M. Ramos, HRDS), using the monitoring template attached herewith.
3. For your compliance.

For: **DR. EVANGEL M. LUMINARIAS, CESO V**
Schools Division Superintendent


NERI C. OJASTRO, Ed. D., CESE
Assistant Schools Division Superintendent
Officer-In-Charge



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2017 Midyear INSET Monitoring

Name of School: _____

Name of School Head: _____

Title of Training	
Date of Conduct	

Training Aspects	Evident		Not Evident		Remarks
<i>A. Pre-Program Implementation</i>					
T&D Program Design					
Training Matrix					
Budget Requirements					
Responsibility Guide/Program Management Team					
Complete Session Guides					
<i>B. Program Implementation</i>					
	Poor (1)	Satisfactory (2)	Very Satisfactory (3)	Outstanding (4)	
<i>I. Design</i>					
Clarity of Training Objectives					
Relevance of Content					
Sequence of Content					
Usefulness of Training/Learning Materials					
<i>II. Facilitator/s</i>					
<i>Note: Please observe at least one (1) facilitator</i>					
Name/s of Facilitator/s: _____					
Topic: _____					
Mastery of the subject matter					
Time management					
Appropriateness of training/learning methodologies					
Professional conduct					
<i>IV. Administration</i>					
Learning Environment					
Facilities and equipment					
<i>V. Participants</i>					
Attendance					
Participation/Engagement					

Other Significant Observations:

Monitored by: _____
Name and signature

Date: _____