



Republic of the Philippines
Department of Education
INFORMATION AND COMMUNICATIONS TECHNOLOGY SERVICE
Pasig City, Philippines

SCHOOL ID: _____ NAME OF SCHOOL: _____

Classification (if recipient pls. check)

- Main Annex Annex A Annex B
 Campus A Campus B Campus C

Region: _____ Province: _____ District: _____ City/Municipality: _____

Division: _____ Superintendent: _____

Principal/School Head: _____

Contact No./Cellphone No.: _____ e-mail address: _____

School Property Custodian: _____ Contact No.: _____

Name of Computer Laboratory in-Charge: _____

Contact No./Cellphone No.: _____

Tel. No. (of the school): _____ Fax No.: _____ e-mail address: _____

In compliance to DepED Memo. No. 280, series of 2011, the school's readiness for the DCP shall be assessed by the Division ICT Coordinator according to the following criteria. Please tick appropriate box.

CRITERIA	Yes	No	REMARKS
1. Multi-media Classroom	<input type="checkbox"/>	<input type="checkbox"/>	_____
2. Computer Tables	<input type="checkbox"/>	<input type="checkbox"/>	_____
3. Windows & Doors with grills	<input type="checkbox"/>	<input type="checkbox"/>	_____
4. Proper electrical wirings & outlets duly certified by the Municipal/City Electrician	<input type="checkbox"/>	<input type="checkbox"/>	_____
5. Provision of adequate security mechanisms	<input type="checkbox"/>	<input type="checkbox"/>	_____
6. School Inspectorate team were organized	<input type="checkbox"/>	<input type="checkbox"/>	_____
7. 50 pieces (HS) / 40 pieces (ES) mono chairs	<input type="checkbox"/>	<input type="checkbox"/>	_____
8. At least 2 units of stand fan	<input type="checkbox"/>	<input type="checkbox"/>	_____
9. Sufficient electrical lighting	<input type="checkbox"/>	<input type="checkbox"/>	_____

Based on the assessment above, the school is:

- Ready All Criteria (1-9) were satisfactorily met
- Partially Ready Criteria 1-6 were met but criteria 7-9 are to be complied with prior to the installation of the equipment
- Not Ready At least one of critical 1-6 is not met

RECOMMENDATIONS:

Empty rectangular box for recommendations.

ASSESSED BY:

CONCURRED BY:

(Name and Signature of Division IT Officer)

(Name and Signature of School Head)