



Republic of the Philippines  
Department of Education  
Cordillera Administrative Region  
**DIVISION OF BAGUIO CITY**  
Upper Session Road Extension, Baguio City 2600



## Division Memorandum

No. 140, s. 2017

### MONITORING OF PANTAWID PAMILYANG PILIPINO PROGRAM (4Ps)

To : Public Schools District Supervisors  
Public School Principals  
4Ps Coordinators

1. This is to inform to the field that the Department of Social Welfare and Development- Baguio will be having an information sharing among agencies to ensure the complementation and convergence of related programs and activities in the implementation, monitoring and evaluation on the Pantawid Pamilyang Pilipino Program to be held on June 14, 2017 at City Mayor's Office,
2. In line with this, **School 4Ps coordinators are requested to fill-out the enclosed Monitoring of 4Ps Beneficiary Form** to be submitted on or before June 7, 2017 for consolidation. Please refer to Enclosure 1 of this memorandum.
3. Monitoring of 4Ps Beneficiary Forms may be submitted in soft or hardcopy to SOCMOB Section c/o ELAINE B. CABUAG or you may sent through e-mail at [elainecabuag@gmail.com](mailto:elainecabuag@gmail.com) .
4. Immediate dissemination and compliance of this memorandum is desired.

 **BEATRIZ G. TORNO, Ph.D., CESO VI**  
Concurrent Schools Division Superintendent

  
**ROBERTO R. GONZALES**  
Administrative Officer V



Republic of the Philippines  
 Department of Education  
 Cordillera Administrative Region  
**BAGUIO CITY SCHOOLS DIVISION OFFICE**  
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 Tel.no.(074) 446-14-88/ (074) 446-67-38



NAME OF SCHOOL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

DISTRICT: \_\_\_\_\_

**MONITORING OF PANTAWID PAMILYANG PILIPINO PROGRAM (4Ps)  
 BENEFICIARIES**

A. List of 4Ps Children who received recognitions or Honors for SY 2016-2017.

NO	NAME	SEX (M/F)	GRADE LEVEL	TYPE OF AWARD (ex: with honors, best in Math, special awards,) *please specify
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

*\*Please use separate sheet if needed*

B. **LIST** of 4Ps children who graduated/completed in SY 2016-2017

<b>NAME OF GRADE 6 COMPLETER (for Elementary Schools)</b>	<b>SEX</b>

<b>NAME OF GRADE 10 COMPLETER (for High Schools)</b>	<b>SEX</b>

C. Please list any Best Practices or initiatives of the school head, teachers or parents in the improvement of the implementation of **Pantawid Pamilyang Pilipino Program** in your school. *You may attach pictures.*

- 1.
- 2.
- 3.
- 4.
- 5.

Prepared by:

\_\_\_\_\_  
**Pantawid Pamilyang Pilipino Program Coordinator**

Noted by:

\_\_\_\_\_  
School Head