

(Enclosure No. 1b to DepEd Order No. 21, s. 2012)

DIVISION SUMMARY REPORT ON KINDERGARTEN REGULAR PROGRAM (KRP)
SY _____

Division: _____

Region: _____

NO.	DISTRICT	SCHOOL ID	SCHOOL	ADDRESS	NAME OF TEACHER	KINDERGARTEN TEACHER'S INFORMATION				NUMBER OF CLASSES	ENROLLMENT			REMARKS (indicate if with ECE trainings)	
						AGE	ELIGIBILITY	YEAR IN SERVICE	ECE UNITS/M.A. EARNED		DATE OF APPOINTMENT	M	F		Total
1															
2															
3															
4															
5															
6															
7															
8															
9															
10															
11															
12															
13															
14															
15															
TOTAL															

Note: Please indicate grand total per column and use additional sheets if necessary.

Prepared by: _____

Certified true and correct: _____

Signature over printed name

Signature over printed name

Designation

Designation

Date: _____

cc: Regional DepED Office
Central DepED Office - electronic file in excel format thru kindergartenproject@yahoo.com.ph