

School Report on Kindergarten _____

School Year _____

Region _____

Division _____

School _____

District _____

Name of Pupil			Gender		Date of Birth	Age	Remark
Last Name	First Name	Middle Initial	Male	Female			

Note: Use additional sheet if necessary.

Prepared by:

Certified true and Correct:

 Teacher
 Signature over Printed Name

 Principal/School Head
 Signature over Printed Name

Date: _____

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