

Department of Education
SUPREME STUDENT GOVERNMENT ELECTION CONSOLIDATED REPORT
School Year 2012-2013

REGION : _____
DIVISION : _____

NAME OF SCHOOL	SCHOOL ADDRESS	SCHOOL E-MAIL ADDRESS	SCHOOL CONTACT NUMBER	NAME OF PRINCIPAL	NAME OF ADVISER	ELECTED PRESIDENT	DATE OF ELECTION

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A Certificate of Recognition will be given to the school, thru the Division Office, which has submitted the election report on time.

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