



Republic of the Philippines
Department of Education
REGION IX
SCHOOLS DIVISION OF DAPITAN CITY

DIVISION MEMORANDUM

No. 37 s. 2022

TO : Chief CID & SGOD
Education Program Supervisor
Public School District Supervisor
School Health Personnel
Public Elementary School Heads
All Others Concerned
This Division

FROM : FELIX ROMY A. TRIAMBULO, CESO V
Schools Division Superintendent

SUBJECT : SUBMISSION OF REPORTS ON THE IMPLEMENTATION OF THE SCHOOL
BASED FEEDING PROGRAM FOR SCHOOL YEAR 2021-2022

DATE : JANUARY 21, 2022



1. Pursuant to DepEd Order No. 39 s. 2017 Entitled "Operational Guidelines on the Implementation of the School- based Feeding Program for School year 2017-2022" repeatedly the Department of Education is closely monitoring the implementation of SBFP.
2. To ensure compliance with the SBFP policy, all School Heads and SBFP implementers are advised to submit the following reports.
 - a. OK sa DepEd - SBFP Program Terminal Report Form (SBFP- Form A).
 - b. SBFP Form 3 (Record of Daily Feeding)
3. Enclosed is the template to be accomplished.
4. Submission of reports shall be submitted to SGOD (School Health Section), of this Division on or before February 1, 2022.
5. Immediate dissemination of this memorandum is desired.

SGOD - SHN - 002 -S - 2022



Address: Sunset Boulevard, Dawo, Dapitan City
Telephone No.: (65) 908-8242 Fax No.: (65) 908-8361
Website: www.depeddapitan.net Email Address: dapitancity@deped.gov.ph



	Quality Form		Document Code:
	OK sa DepEd - School-Based Feeding Program (SBFP) Program Terminal Report Form (SBFP PTR - Form A)		Revision:
			Effectivity date: 01-01-2021
			BLSS-School Health Division

Region/Division:	Period Covered:
School Name & ID:	
School Address:	
School Telephone Number:	Mobile Number:
Fax Number:	Email Address:
Total Enrolment:	Total No. of T & NTP:

A. ACCOMPLISHMENTS**1. SBFP Coverage: Primary Beneficiaries for Nutritious Food Products**

Grade Level	All Kinder	Severely Wasted	Wasted	TOTAL
Kinder				0
Grade 1				0
Grade 2				0
Grade 3				0
Grade 4				0
Grade 5				0
Grade 6				0
SPED				0
Multigrade				0
TOTAL	0	0	0	0

2. SBFP Coverage: Secondary Beneficiaries for Nutritious Food Products

Grade Level	Stunted	Pupils-at-Risk-of-Dropping-Out (PARDOs)	Indigenous Peoples	Indigent Learners	TOTAL
Kinder					0
Grade 1					0
Grade 2					0
Grade 3					0
Grade 4					0
Grade 5					0
Grade 6					0
SPED					0
Multigrade					0
TOTAL	0	0	0	0	0

3. SBFP Coverage: Primary Beneficiaries for Milk

Grade Level	All Kinder	Severely Wasted	Wasted	TOTAL
Kinder				0
Grade 1				0
Grade 2				0
Grade 3				0
Grade 4				0
Grade 5				0
Grade 6				0
SPED				0
Multigrade				0
TOTAL	0	0	0	0

4. SBFP Coverage: Secondary Beneficiaries for Milk

Grade Level	Stunted	Pupils-at-Risk-of-Dropping-Out (PARDOs)	Indigenous Peoples	Indigent Learners	TOTAL
Kinder					0
Grade 1					0
Grade 2					0
Grade 3					0
Grade 4					0
Grade 5					0
Grade 6					0
SPED					0
Multigrade					0
TOTAL	0	0	0	0	0

5. Type of Food Commodities Distributed to Learners (Check applicable items)**a. Nutritious Food Products**

Enutribun	
Fortified/Enriched Bread	
Fruits	
Rootcrops	
Vegetables	
Nutripacks	

b. Milk

Fresh Milk	
Sterilized Milk	
Commercial Milk	
Provided by Partner	

6. SBFP Funds (for those with downloaded funds)

Tranches	Amount Received from SDO	Funds Utilized	Percent Utilization (col 3/2*100%)
Total:			

B. DONATIONS/ RESOURCES GENERATED

(Add Additional Sheets, if needed)

Partner & Type of Donations/Services Provided	Quantity (if applicable)	Estimated Cost (if applicable)

C. SIGNIFICANT EVENTS OF SBFP, AND OTHER HEALTH AND NUTRITION PROGRAMS/ EXPERIENCES/ GOOD PRACTICES

(Add Additional Sheets, if needed)

What happened?	Who were involved?	When	Outcome: What is/are its important contribution to the School-Based Feeding Program of the school?

D. LESSONS LEARNED

G. SUGGESTIONS TO STRENGTHEN SBFP

(Include support needed from Central, Region, and Division Office that can increase the impact of OK sa DepEd Program in the schools)

E. PROPOSED PLAN OF ACTION AND RECOMMENDATIONS

F. PHOTOS (Before, During and After)

Prepared by:	Noted:
_____	_____
SBFP Coordinator	School Head
Date: _____	



SCHOOL-BASED FEEDING PROGRAM
RECORD OF DAILY FEEDING

FOR THE MONTH OF _____, SY _____

Region _____
Division _____
District _____

School: _____
Grade: _____ Section _____
School ID Number: _____

NAME OF PUPIL	ACTUAL FEEDING																			
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
1																				
2																				
3																				
4																				
5																				
6																				
7																				
8																				
9																				
10																				
11																				
12																				
13																				
14																				
15																				
16																				
17																				
18																				
19																				
20																				
21																				
22																				
23																				
24																				
25																				
TOTAL:																				

Prepared by: _____

Feeding Teacher / School Nurse

Approved by: _____

School Head

B. Deworming	
(x) - not dewormed	(H) - Present, served with Hot meals
(✓) - dewormed	(M) - Present, served with Milk
	(H/M) - Present, served with Hot meals & Milk
	(A) - Absent, not served
	(H ² /M ² /(H/M ²)) - Present, served twice

Note: This form shall be prepared by the school to be consolidated using the Revised OKD Form A.

