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**Republic of the Philippines**

**Department of Education**

**REGION I**

**SCHOOLS DIVISION OFFICE DAGUPAN CITY**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_School\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address**

**LEARNING AND DEVELOPMENT PROGRAM END OF ACTIVITY AND EVALUATION REPORTS**

|  |  |  |
| --- | --- | --- |
| 1. **Name of the Organizer:** | | |
| 1. **Title of the Activity:** | | |
| 1. **Date/Duration of the Activity:** | | |
| 1. **Target group of participants:** | | |
| 1. **Total Number of participants:** | | |
| **Male** | **Female:** | **Total:** |
| 1. **Fund Source:** | **Financial Target:** | **Actual Expenditure:** |

1. **Objective/s of the Activity:**
2. **Highlights of the Activity (***narrative and photos with caption***):**
3. **Overall Evaluation of the participants (***Attach the report from SMME/ICT Coordinator***)**

**SUMMARY OF SESSION EVALUATION**

|  |  |  |
| --- | --- | --- |
| **Session Title and Facilitator/s** | **Average Rating** | **Descriptive Equivalent** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

(*Please add rows when needed)*

**EVALUATION ON THE TECHNOLOGICAL ASPECTS OF THE ONLINE SESSIONS**

|  |  |  |
| --- | --- | --- |
| **Indicator** | **Average Rating** | **Descriptive Equivalent** |
| 1. Quality of audio |  |  |
| 1. Quality of video |  |  |
| 1. Internet Connectivity |  |  |
| 1. Interactivity |  |  |
| 1. Length of Session |  |  |
| 1. Visual Content and Graphics |  |  |
| 1. Platformed used |  |  |
| Overall Mean |  |  |

**SUMMARY OF PROGRAM EVALUATION**

|  |  |  |
| --- | --- | --- |
| **Indicator** | **Average Rating** | **Descriptive Equivalent** |
| 1. Attainment of Objectives |  |  |
| 1. Delivery of Content |  |  |
| 1. Program Management Team |  |  |
| Overall Mean |  |  |

**SYNTHESIS OF PARTICIPANTS EVALUATION**

|  |  |
| --- | --- |
| **Indicator** | **Synthesis of participants’ responses** |
| 1. How can the session be improved? |  |
| 1. What are the participants most significant learning? |  |
| 1. How will the training impact the participants? |  |
| 1. Comment and Suggestions for the improvement of the training |  |

1. **Challenges/Issues/Concerns Raised:**

|  |  |
| --- | --- |
| **Challenges/Issues/Concerns Raised** | **Solution** |
|  |  |
|  |  |
|  |  |

1. **Liquidation of Budget Used**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Item** | **Specifications** | **Cost** | **Actual Cost** | **Provider** | **OR. No.** |
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1. **Ways Forward: (Action Plan on how to monitor, evaluate and report training outputs)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Objectives** | **Activities** | **Performance Indicators** | **Time Frame** | **Success Indicators** |
|  |  |  |  |  |
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1. **Proponent’s Reflection:**

*(Type your response here)*

Prepared by:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Signature over printed name of the proponent)

Reviewed by:

MITCHELLENE VIGILIA-RIVO

Senior Education Program Specialist

Human Resource and Development Section

Recommending Approval:

**MARIA LINDA R. VENTENILLA** **MA. CRISELDA G. OCANG**

Chief Education Program Supervisor Assistant Schools Division Superintendent

APPROVED:

**AGUEDO C. FERNANDEZ, CESO VI**

Schools Division Superintendent

*Note: End-of-Activity and Overall of Evaluation Reports should be reported as one in a minimum of five but not more than fifteen-page narrative report. Pictures should be limited to 10 frames. The accomplished form should be submitted 10 days after the conduct of the activity and the approved proposal should be attached for reference.*