**NOMINATION FORM 3 DIVISION CATEGORY**

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| **Division Category:** | |
| **THE NOMINEE** | |
| **Schools Division Office:** | |
| **Division/Office Address:** | |
| **Telephone Number:** | **DepEd Email Address:** |
| **OFFICE/DIVISION HEAD** | |
| **Name:** | **Sex:** |
| **Designation:** | |
| **Telephone/Mobile No:** | |
| **Deped Email Address:** | |
| **NOMINATOR** | |
| **Name:** | **Position:** |
| **Office:** | **Telephone/Mobile No.:** |
| **Office Address:** | **Email Address:** |
| **ADDITIONAL INFORMATION ABOUT THE NOMINEE** | |
| Was your SDO a previous Gawad Patnugot Nominee? *Yes No* If yes, what year?\_\_\_  What award category? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Was your SDO a previous Gawad Patnugot Semi-finalist? *Yes No* If yes, what year?  What award category? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Was your SDO a previous Gawad Patnugot Winner? *Yes No* If yes, *w*hat year? \_\_\_\_\_\_\_\_  What award category? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

**NOMINATION WRITE-UP***(Maximum of 10 pages, A4 size bond paper, Bookman Old Style #11 font, including executive summary)*

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| **SDO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **OFFICE ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **I. Executive Summary** (Description of why the division is deserving of the award in not more than 150 words which includes physical attributes, performance and community linkages, TEA Governance implementation, Financial Management, DepEd Program Implementation.) |
| **II. Significant Accomplishment/s within the last years (June 2015- June 2017)**(Description of the Project/Work Accomplished, Strategies/Activities Done that have significantly impacted the performance of the learners and the organization as well.) |
| **III. Impact of the Accomplishments**(Indicate problems addressed, people/office benefited and transactions facilitated. Indicate whether or not the accomplishments are part of the nominee’s regular functions/mandated or the product of the SDO’s initiative. If parts of the nominee’s regular duties or mandated, justify why the accomplishments are considered exemplary or extraordinary. |
| **IV. Innovations** (If any. Original, creative programs, projects, activities made in the last three (3) years in connection to the award category)1page abstract |
| **V. Other Information**(List or mention Major Awards/Citations Received by the SDO. No need to attach photocopies of certificates.) |

**CERTIFICATION**

We attest to all facts contained herein and authorize the use of these information for publication. We understand that the Regional PRAISE Committee will validate the accuracy of the information contained in this form and grant our consent to the conduct of a background investigation. Any misrepresentation made by the signatories shall be a ground for disciplinary action pursuant to applicable CSC laws and rules.

PRINTED NAME AND SIGNATURE

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

PERSON IN-CHARGE OF THE PROGRAM DIVISION PRAISE COMMITTEE CHAIR

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

DIVISION HRMO DIVISION OFFICE HEAD