



Republic of the Philippines  
Department of Education  
National Capital Region  
**SCHOOLS DIVISION OFFICE**  
City of Mandaluyong

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**MEMORANDUM**

TO: Chief Education Supervisor (SGOD)  
Chief Education Supervisor (CID)  
Education Program Supervisors  
Principals, Public Elementary and Secondary Schools

*ASAP pls. [Signature]*  
9-30-

Subject: **SUBMISSION OF CIP NARRATIVE REPORT SY 2014-2015**

Date: September 30, 2015

In line with the move of the Department of Education to strengthen its decentralization efforts through School-Based Management (SBM), the School Effectiveness Division (SED) has been enhancing the SIP process and guidebook.

As the start of the nationwide rollout of the enhanced SIP, the SDO-Mandaluyong, being part of the first phase of the CI project, is requested to submit documentation demonstrating the effectiveness of the CI tools.

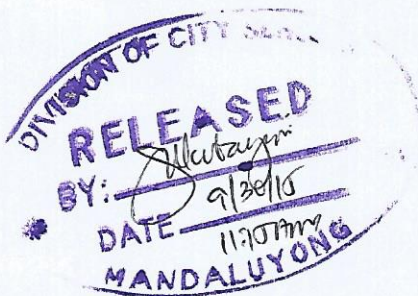
In this regard, this office is requesting all the schools to submit a one-page (long bond paper) narrative report of the CI project initiated last SY 2014-2015. (See attached format). Pictures at least 6 pieces in JPEG format are also required. Submit them in both soft and hard copy to Dr. Alyn G. Mendoza, Division CIP Coordinator on October 1, 2015 at 10:00 am.

For your immediate action.

Wide and immediate dissemination of this **Memorandum** is desired.

**NERISSA L. LOSARIA, CESO VI**  
Officer-In-Charge

Office of the Schools Division Superintendent



SCHOOLS DIVISION OFFICE  
MANDALUYONG CITY

\_\_\_\_\_ School

CIP NARRATIVE REPORT  
SY 2014-2015

Title: \_\_\_\_\_

Area of Concern: \_\_\_\_\_

Background/Rationale: (Please see your CI Template)

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

Objectives: (Please see your CI Project Proposal)

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

Highlights: (Activities/CI Methodology undertaken)

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

Effect/Impact:

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

Learnings:

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

Next Steps:

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

Prepared: \_\_\_\_\_  
School CIP Coordinator/Facilitator

Submitted:

\_\_\_\_\_  
Principal

(Noted: Please in paragraph form.)