



Republic of the Philippines
Department of Education
 REGION XI
SCHOOLS DIVISION OF DAVAO DE ORO



Office of the Schools Division
 Superintendent

18 October 2023

DIVISION MEMORANDUM
 SGOD-2023- 858

**QUARTERLY SUBMISSION OF LEARNER RIGHTS AND PROTECTION
 (CHILD PROTECTION) SCHOOL REPORTS ON INCIDENTS**

TO: All District Heads
 All School Heads
 All District LRP Focal
 All School LRP Focal
 All others concerned

1. In relation to **Division Memorandum SGOD-2023-257**, regarding the quarterly submission of Child Protection Consolidated Reports on Incidents, and the migration of the DepEd Gmail Account to a Microsoft Outlook account.
2. Please be informed, that all designated School LRP Focal are required to directly submit quarterly child protection school reports on incidents of bullying and child abuse, including cases involving children at risk (CAR), and children in conflict with the law (CICL) every end of the quarter to the SDO LRP Focal through the new link below using DepEd Microsoft Outlook Account,

Division Consolidated Reports on Incidents of Bullying

Link: <https://forms.office.com/r/UtUWK4hisU>

Division Consolidated Reports on Incidents of Child Abuse

Link: <https://forms.office.com/r/7WS48be7Jc>

Division Consolidated Report on Incidents of Children in Conflict with the Law (CICL)

Link: <https://forms.office.com/r/scZ0hd28tB>

Division Consolidated Report on Cases of Children-At-Risk (CAR)

Link: <https://forms.office.com/r/pSpyaXFgeb>

Division Consolidated Report on Schools with CPP, Anti-Bullying Policy and CPC

Link: <https://forms.office.com/r/z1bBy4gD7A>

Division Consolidated Report on Other Incident on Learner Rights and Protection Concerns

Link: <https://forms.office.com/r/p83mKXb2Kv>



Address: Capitol Complex, Brgy. Cabidanan, Nabunturan, Davao de Oro
 Contact No. 0951-387-1728 (TNT); 0915-399-7779 (Globe)
 Email Address: davaodeoro@deped.gov.ph
 Website: www.depeddavaodeoro.ph

Doc. Ref. Code	PAWIM-F-022	Rev	00
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3. Further, for those who have no Microsoft DepEd account, kindly send directly all the signed school reports to this email address cpp.davaodeoro@deped.gov.ph every end of the quarter.
4. Attached are the school reports on incidents template.
5. For more details and queries regarding the submission of the report and other LRP-related concerns, kindly contact Ms. Margirie M. Asuque, Division LRP Focal through this email address at cpp.davaodeoro@deped.gov.ph.
6. For information and strict compliance.

CRISTY C. EPE

Schools Division Superintendent

*Encl.: As stated
Reference:
FN: SGOD13*



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School-Based Report on Incidents of Bullying
School Year 20__ - 20__

School: _____ School ID: _____
 Classification: (Private/Public) _____
 Level: (Kindergarten/Elementary/Secondary) _____

Date / Place of Incident	Nature of Bullying			Victims			Perpetrator			Action Taken	Recommendation	Status (Resolved/ Pending/ Referred to other agency)
	Physical	Social	Cyber Bullying	Name	Age	Sex (M/F)	Name	Age	Sex (M/F)			

Number of Resolved Cases
Cases for Monitoring
Number of Cases referred to other Government Agencies
Number of Cases referred to other Non-Government Agencies

Note: Bullying is perpetrated by a student against another student which may be:
 Physical - unwanted physical contact (punching, shoving, pushing, kicking, slapping, hitting, tickling, headlocks, etc.)
 Social - refers to any deliberate, repetitive and aggressive social behavior intended to hurt or belittle an individual (name-calling, cursing, labeling, etc.)
 Gender-Based - refers to any act that humiliates or excludes a person on the basis of perceived or actual sexual orientation and gender identity
 Cyber Bullying - any bullying done through the use of technology or any electronic means (texting, email, chatting, online games, etc.)

Revised and Conformed by: _____ Prepared by: _____
 (Name and Designation) (Name and Designation)

Date: _____ Date: _____

SCHOOL-BASED CONSOLIDATED REPORT ON CASES OF CHILDREN-AT-RISK (CAR)

School: _____

School ID: _____

Period Covered: _____

Total Number of Students: _____

Classification: Public
 Private

Level: Kindergarten
 Elementary
 Junior High School
 Senior High School

I. CHILDREN-AT-RISK (CAR)

Classification	No. of Students		Action Taken	Present Status
	Male	Female		
1. Victim of abuse (sexual, physical, psychological, mental, economic and other mean)				
2. Victim of Neglect				
3. Coming from a dysfunctional family or without parent or guardian				
4. Being a member of a gang				
5. Living in a community with a higher level of criminality				
6. Living a situation of armed conflict				
7. Committed a status Offense under Section 57 of RA 9344, as amended				
8. Mendicant under PD 1563				
9. Solvent/ Rugby user				
10. Marijuana/ Drug Use/ Dependency				
11. Smoking				
12. Others				

II. Concrete descriptions of actions taken by the school to alleviate the risk factors of the CAR:

Number of Resolved Cases	
Cases for Monitoring	
Number of Cases referred to other Government Agencies	
Number of Cases referred to other Non-Government Agencies	

Prepared by:

Validated by:

(Designation)

Principal

Date: _____

Date: _____

**School-Based Consolidated Report on Incidents of Children in Conflict with the Law (CICL)
School Year 20__-20__**

School: _____
Period Covered: _____

School ID: _____

Classification: Public Private

Level: Kindergarten Elementary

Junior High School Senior High School

A. Consolidated Report on Incidents of Children in Conflict with the Law (CICL)						
Learner's Reference Number (LRN)	Age	Sex (M/F)	Case/Violation	Action Taken	Intervention/ Diversion Program	Remarks

B. Concrete descriptions of any intervention program or diversion program that the school initiated or adopted which facilitated the reintegration of the CICL in the school and community

Number of Resolved Cases	
Cases for Monitoring	
Number of Cases referred to other Government Agencies	
Number of Cases referred to other Non-Government Agencies	

Prepared by: _____
(Designation)

Date: _____

Validated by: _____
Principal

Date: _____

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SCHOOL-BASED CONSOLIDATED REPORT ON OTHER LEARNER RIGHTS AND PROTECTION CONCERNS

School Year 20__ - 20__

School: _____

Classification: (Private/Public)

School ID: _____

Address: _____

Level: (Kindergarten/Elementary/Secondary)

Date/ Place of Incident	Other Child Protection Concerns						Victims			Perpetrator			Action Taken	Intervention Program	Status (Resolved/ Pending/ Referred to other agency)	
	Suicide	Child Labor	Child Trafficking	OSEC	SEC	Corporal Punishment	Child Abuse (Parent-to-Parent)	Name	Age	Sex (M/F)	Name	Age				Sex (M/F)

Note: OSEC - Online Sexual Exploitation of Children
SEC - Sexual Exploitation of Children

Number of Resolved Cases
Cases for Monitoring
Number of Cases referred to other Government Agencies
Number of Cases referred to other Non-Government Agencies

Revised and Confirmed by: _____

(Name and Designation)

Prepared by: _____

(Name and Designation)

Date: _____

Date: _____

Division Consolidated Report on Schools with Child Protection Policy, Anti-Bullying Policy and Child Protection Committee

School: _____

Classification (Private/Government): _____

Period Covered: _____

Level (Elementary/Secondary) _____

Classification	ELEMENTARY	JUNIOR HIGH SCHOOL	SENIOR HIGH SCHOOL	GRAND TOTAL
Child Protection Policy with Anti-Bullying Policy				0
Child Protection Policy Only				0
Anti-Bullying Policy				0
No Policy				0
WITH Established Child Protection Committee				0
Without Established Child Protection Committee				0

Prepared by: _____

Validated by: _____

(Designation)

Date: _____

Principal/ Superintendent/ Regional Director

Date: _____



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In compliance with the Data Privacy Act of 2012, the Learner Rights and Protection Office (LRPO), all personal data obtained from this form is entered and stored within DepEd's authorized information and communications system and will only be accessed by authorized personnel. Moreover, Section 18 of the DepEd Child Protection Policy ensures that the identity or other information pertaining to the learner/s or individuals involved shall be withheld from the public to protect their privacy.

INTAKE SHEET

I. INFORMATION

A. VICTIM:

Name: _____

Date of Birth: _____ Age: _____ Sex: _____

Gr./Yr. And Section: _____ Adviser _____

Parents:

Mother: _____ Age: _____

Occupation: _____

Address: _____

Father: _____ Age: _____

Occupation: _____

Address: _____

B. COMPLAINANT:

Name: _____

Relationship to the Victim: _____

Address and Contact Number: _____

C. RESPONDENT:

C-1. If respondent is a School Personnel

Name: _____

Date of Birth: _____ Age: _____ Sex: _____

Address and Contact Number: _____

Position/Designation: _____

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C-2. If respondent is a Student

Name: _____

Date of Birth: _____ Age: _____ Sex: _____

Gr./Yr. and Section: _____

Parents/Guardian:

Mother: _____ Age: _____

Occupation: _____

Address and Contact Number: _____

Father: _____ Age: _____

Occupation: _____

Address and Contact Number: _____

II. DETAILS OF THE CASE:

III. ACTION TAKEN:

1

2

3

IV. RECOMMENDATIONS:

1

2

3

Prepared by:

Signature over Printed Name

Designation

Date

Noted by:

Signature over Printed Name

Designation

Date