



Republic of the Philippines
 DEPARTMENT OF EDUCATION
 National Capital Region
 DIVISION OF CITY SCHOOLS
 Pasay City
 North District, Cluster I



EPIFANIO DE LOS SANTOS ELEMENTARY SCHOOL

School ID: 136587

GUIDANCE DEPARTMENT PAHAYAG NG MAG-AARRAL

Pangalan: _____ Baitang at Pangkat: _____ Petsa: _____
 Pangalan ng Magulang: _____ Tirahan: _____
 Contact Number: _____ Oras: _____ Adviser: _____

PANGYAYARI: _____

Lagda ng Mag-aaral

(SA MAG-AARAL : HUWAG SULATAN ANG BAHAGING ITO)

INFRACTION: _____

Action Taken:

- Verbally reprimanded / Offense Recorded in the Guidance Logbook
- Letter to parent was given to the pupil
- Parent Conference Schedule: Date: _____ Time: _____ Venue: _____

Remarks:

- Parent / Guardian came on scheduled date of conference
- Parent / Guardian was not able to come on scheduled date of conference
- Others: _____

Pangalan ng Magulang: _____ Lagda ng Magulang: _____
 Adviser: _____ Guidance Teacher: _____

KASUNDUAN

Date: _____

Conforme:

 Pangalan at Lagda ng Mag-aaral

 Baitang at Pangkat

 Pangalan at Lagda ng Adviser

Conforme:

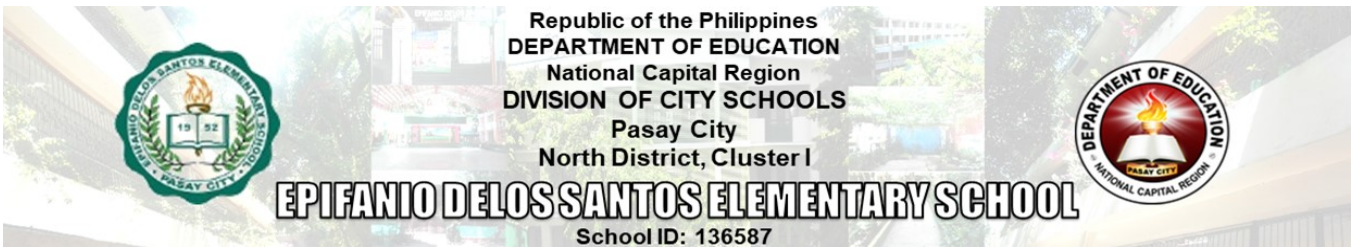
 Pangalan at Lagda ng Mag-aaral

 Baitang at Pangkat

 Pangalan at Lagda ng Adviser

(Guidance Teacher Use only)

- Verbally reprimanded / Offense Recorded in the Guidance Logbook
- First Offense
- Second Offense
- Third Offense
- Community Service (Please see attached Community Service Slip)
- Others: _____



BRING PARENT FORM

Petsa

Mahal na Magulang,
Ipinagbibigay alam po namin sa inyo na ang inyong anak na si _____ ng _____ ay:

- | | |
|--|---|
| _____ Madalas na hindi pumapasok (habitual absences) | _____ Nahuling naninigarilyo sa loob / labas ng paaralan |
| _____ Madalas na huli sa klase (habitual tardiness) | _____ Pumasok sa paaralan nang nakainom ng alak |
| _____ Hindi pumapasok sa ibang klase (cutting classes) | _____ Nagdala o uminom ng alak sa loob ng paaralan |
| _____ May suliranin sa pag-uugali (behavioural misconduct) | _____ Nagsusugal sa loob ng paaralan |
| _____ Hindi nagdadala ng gamit | _____ Naninira ng pag-aari ng iba/gamit ng paaralan (vandalism) |
| _____ Hindi gumagawa ng gawaing pampaaralan | _____ Nakikipag-away sa paaralan |
| _____ Hindi dumadalo sa flag ceremony | _____ Nambastos ng guro/ tauhan sa paaralan |
| _____ Hindi kumuha ng pagsusulit sa _____ | _____ iba pa: _____ |

Mangyari po lamang na makipag-ugnayan kayo sa aming paaralan upang mapag-usapan ang dapat gawin para sa kabutihan ng inyong anak.

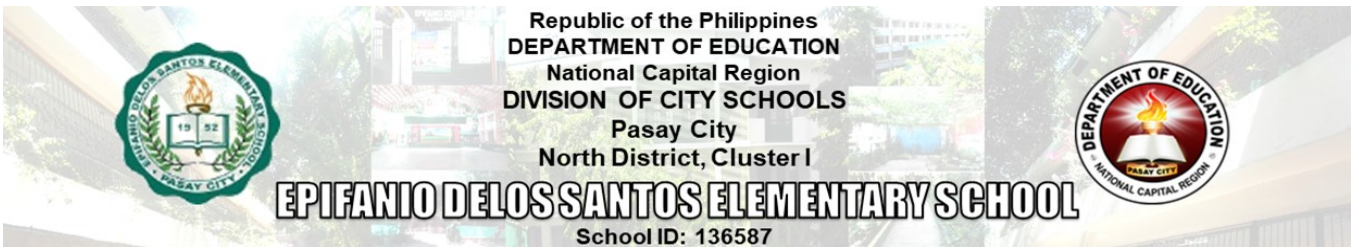
Petsa: _____ Oras: _____ Lugar: _____

For Guard Use:
Signature over printed Name of Person Visited /Date

Free Schedule of Teacher to Visit:
Time: _____ Room: _____

Gumagalang,

Guro/Tagapayo/GuidanceCounselor



BRING PARENT FORM

Petsa

Mahal na Magulang,
Ipinagbibigay alam po namin sa inyo na ang inyong anak na si _____ ng _____ ay:

- | | |
|--|---|
| _____ Madalas na hindi pumapasok (habitual absences) | _____ Nahuling naninigarilyo sa loob / labas ng paaralan |
| _____ Madalas na huli sa klase (habitual tardiness) | _____ Pumasok sa paaralan nang nakainom ng alak |
| _____ Hindi pumapasok sa ibang klase (cutting classes) | _____ Nagdala o uminom ng alak sa loob ng paaralan |
| _____ May suliranin sa pag-uugali (behavioural misconduct) | _____ Nagsusugal sa loob ng paaralan |
| _____ Hindi nagdadala ng gamit | _____ Naninira ng pag-aari ng iba/gamit ng paaralan (vandalism) |
| _____ Hindi gumagawa ng gawaing pampaaralan | _____ Nakikipag-away sa paaralan |
| _____ Hindi dumadalo sa flag ceremony | _____ Nambastos ng guro/ tauhan sa paaralan |
| _____ Hindi kumuha ng pagsusulit sa _____ | _____ iba pa: _____ |

Mangyari po lamang na makipag-ugnayan kayo sa aming paaralan upang mapag-usapan ang dapat gawin para sa kabutihan ng inyong anak.

Petsa: _____ Oras: _____ Lugar: _____

For Guard Use:
Signature over printed Name of Person Visited /Date

Free Schedule of Teacher to Visit:
Time: _____ Room: _____

Gumagalang,

Guro/Tagapayo/GuidanceCounselor



Republic of the Philippines
 DEPARTMENT OF EDUCATION
 National Capital Region
 DIVISION OF CITY SCHOOLS
 Pasay City
 North District, Cluster I



EPIFANIO DELOS SANTOS ELEMENTARY SCHOOL

School ID: 136587

REFERRAL SLIP

Date: _____

This is to refer the following pupil/s for counselling:

NAME OF THE PUPIL/S	GRADE AND SECTION	REASON/S
_____	_____	_____
_____	_____	_____
_____	_____	_____

SUBJECT TEACHER / CLASS ADVISER
 Action Taken / Signature:

GUIDANCE TEACHER / COUNSELOR: _____
 Action Taken / Recommendation:

GRADE LEVEL COORDINATOR
 Action Taken / Signature:

Referred by: _____
 Subject Teacher: _____
 Adviser: _____



Republic of the Philippines
 DEPARTMENT OF EDUCATION
 National Capital Region
 DIVISION OF CITY SCHOOLS
 Pasay City
 North District, Cluster I



EPIFANIO DELOS SANTOS ELEMENTARY SCHOOL

School ID: 136587

REFERRAL SLIP

Date: _____

This is to refer the following pupil/s for counselling:

NAME OF THE PUPIL/S	GRADE AND SECTION	REASON/S
_____	_____	_____
_____	_____	_____
_____	_____	_____

SUBJECT TEACHER / CLASS ADVISER
 Action Taken / Signature:

GUIDANCE TEACHER / COUNSELOR: _____
 Action Taken / Recommendation:

GRADE LEVEL COORDINATOR
 Action Taken / Signature:

Referred by: _____
 Subject Teacher: _____
 Adviser: _____