



Republic of the Philippines

Department of Education **REGION X- NORTHERN MINDANAO** SCHOOLS DIVISION OF EL SALVADOR CITY

Office of the Schools Division Superintendent

October 14, 2024

DIVISION MEMORANDUM No. 40/_____, s. 2024

SUBMISSION OF DOCUMENTARY REQUIREMENTS FOR RESEARCH INCENTIVE

To: **Assistant Schools Division Superintendent Chief Education Supervisors Education Program Supervisors Elementary and Secondary School Heads All Others Concerned** This Division

- 1. This is to inform the field of the submission of documentary requirements for the Research Incentive c/o Province of Misamis Oriental.
- 2. The following documents must be submitted to the Division Office on or before October 18, 2024, 5:00 pm.
 - i. Journal Entry Voucher (4 copies)
 - Obligation Request (3 copies) ii.
 - iii. Provincial Payroll (3 copies)
 - iv. Certification by the School Head
 - List of Teaching/Teaching-Related and Non-Teaching Researchers v.
 - Research Executive Summary and its parts vi.
- 3. School Heads are advised to prepare attachments strictly adhering to the following:
 - a. Prepare the documents in two sets. One (1) set is for the Provincial Accounting Office and the other one (1) is for the Commission on Audit (COA-Province)
 - b. The compilation of the attachments shall start with the research summary of the study undertaken by the School Head followed by the research summaries of the teaching, teaching-related and nonteaching personnel in the school (in alphabetical order regardless of the position).
 - c. Tabbing should be observed strictly to facilitate fast checking and evaluation against the General Payroll.



Address: Zone 3, Poblacion, El Salvador City Telephone No: (088) 855-0113 Website: www.depedelsalvadorcity.net

Email Address: elsavador.city@deped.gov.ph

Transforming Schools, Forging Partners





Republic of the Philippines

Department of Education REGION X- NORTHERN MINDANAO SCHOOLS DIVISION OF EL SALVADOR CITY

- d. Administrative Assistants of the school are directed to countercheck the General Payroll and the supporting documents (e.g. Research Summaries of School Head and Teachers) submitted to the Division Office. In turn, they have to affix their initials at the lower right portion of the names of the School Head. Initials appearing in the document denote that thorough checking has been done.
- 4. Sample payroll and prescribed templates are attached to this Memorandum.
- 5. For more particulars, please contact Ms. Rizan L. Sardane through her mobile phone number 0927 999 4511, or Analyn G. Fabria at 0917 770 1740.
- 6. This office adheres to the Equal Opportunity Principle (EOP). Hence, all actions shall be based solely on the guidelines set with no discrimination on the account of age, gender, identity, sexual orientation, civil status, disability, religion, ethnicity, or political affiliation.
- 7. Immediate and wide dissemination of this Memorandum is directed.

RANDOLPH B. TORTOLA
Schools Division Superintendent

To be included in the Perpetual Index Under the following subject: RESEARCH SGOD/agf



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TEMPLATE OF THE RESEARCH SUMMARY

NOTE: This Research Summary shall be prepared in two (2) sets. Use Times Bookman Old Style and font size 12. Spacing should be single-spaced. Observe the 1.25 inchmargin at the left hand side and 1 inch-margin to the rest of the sides of the A4-size bond paper.

School Logo

Republic of the Philippines Department of Education Region X-Northern Mindanao

Division Logo

DIVISION OF MISAMIS ORIENTAL

Name of School

TITLE OF THE BASIC OR ACTION RESEARCH

Submitted by:

Signature Over Printed Name of the School Head/Teacher/Teaching
Related/Non-Teaching-Researcher
Position Held

TITLE OF THE BASIC OR ACTION RESEARCH

Part I. Situation

This part enshrined the general situation's/circumstance's importance that make the researcher develop his/her research. Further, this is the aim of the study. This part specifically articulated why this study important. Cite some points that prompted the researcher to explore this issue/problem/establish or explore. Data and other pertinent information relative to this study could be discussed in this part. The individuals/groups/pupils/students and others who could benefit/s out of this study should be included. The process/processes on how this study could benefit the potential/prospective beneficiary/ies should form part of this section.

Part II. The Intervention (for Action Research)/Findings and Insights (for Basic Research)

For Action Research (CI-based or per D.O. 16, s. 2017)

This part introduced the intervention/strategy/approach to combat the issue or problem. It described the administered intervention/strategy/approach. This portion also discussed the methods and procedures on how the intervention was administered.

For Basic Research

This part introduced the insights gained out of this study.

Part III. Summary

This part should follow the format hereunder. Further, the following need to be developed as paragraphs discussing each of the following.

- -Purpose
- -The Intervention (for Action Research)/Findings and Insights (for Basic Research)
 - -Findings and Insights
 - -Research Limitations/implications (if applicable)
 - -Reflection

Republic of the Philippines
School Logo Department of Education
Region X-Northern Mindanao
DIVISION OF MISAMIS ORIENTAL

Division Logo

Name of School

Address of School

OFFICE OF THE SCHOOL HEAD

CERTIFICATION

TO WHOM IT MAY CONCERN:

This is to certify that the **personnel** (include the non-teaching personnel, if there's any) named in the attached list (listing follows the General Payroll) including the undersigned had conducted and written their basic or action researches.

This is to certify further that the completed researches conducted by the aforementioned had been thoroughly reviewed, checked by the undersigned and were found in order and adhering strictly to the parts prescribed.

This is to certify further that the completed research reports of the personnel including the undersigned were kept and in the custody of the Office of the Principal of this school.

Issued this <u>date when this certification is signed</u> day of August 2019 at <u>name</u> of the school, address of the school.

NAME OF THE SCHOOL HEAD
Position of the School Head
(Signature over Printed Name)

LIST OF TEACHING/TEACHING-RELATED/NON-TEACHING RESEARCHERS

District of:	
Name of School	
Address of School	

No.	Name of Teaching/Tea Re	Position		
1.	Caño	Adefer	B.	Secondary School Principal III
2.	Aba	Jose Jr.	M.	Teacher I
3.				
4.				
5.				
6.	and the second s			
7.				
8.				
9.		Managhanasaya da gayan hasin sa karang karang darang darang karang karang karang karang karang karang karang k		engan mengan seria ngan seria ngan seria ngan seria ngan pengan pengan pengan pengan pengan pengan pengan pengan
	No one follows			

Prepared by:

School Head
(SIGNATURE OVER PRINTED NAME)

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	MISA	No. Date:					
Co	llection	Check D	Disbursement	Cash Disbu		Others	
			ACCOUNTI				
	Λ	4- 0	Assaurt Code			Amount	
Responsibility Center	Accounts & Explanation		Account Code	PR	Debit	Credit	
				-			
			Total				
Prepared by:			Approved by:				
4 copies	URNAL	ENTRY	VOUCHER				
	MISA	AMIS ORIE	NTAL		No. Date:		
Cc	ollection	Check I	Disbursement	Cash Disb		Others	
			ACCOUNTI				
Responsibility	A		Account Code		Amount		
Center				PR	Debit	Credit	
			Total				
Prepared by:			Approved by:				

Republic of the Philippines PROVINCIAL GOVERNMENT OF MISAMIS ORIENTAL Cagayan de Oro City **OBLIGATION REQUEST** No. JULIET B. AKUT ET. AL Payee: MAUASWAGON INTEGRATED SCHOOL Office: Mauswagon, Laguindingan Mis. Or Address: Account Responsibility **PARTICULARS** Amount F.P.P Code Center 502 99990 26,000.00 3211 Payment for Basic Action Research CY 2024 JULIET B. AKUT Principal I TOTAL: P 26,000.00 B Certified: Certified: A Charges to appropriation/allotment necessary, Existence of available appropriation lawful and under my direct supervision Supporting documents valid, proper and legal Printed EDILBERTO L. OPLENARIA, EdD,CESOV Name Schools Division Superintendent Position Head, Requesting Office/Authorized Representative Printed CLINT KENNETH Y. YAÑEZ,CPA,MDMG Date Provincial Budget Officer Position . Head, Budget Unit/Authorized Representative Printed RANDOLPH B. TORTOLA Date Name Schools Division Superintendent

(3 COPIES)

Head, Requesting Office/Authorized Representative

Position

Date

PROVINCIAL PAYROLL

(Provincial, City or Municipal)

We hereby acknowledge to have received from, Provincial Treasurer of, Misamis Oriental the sums herein specified opposite our respective names, the same, being full compensation for our rendered during the period stated below, to the correctness of which we hereby severally certify.

NO.	NAME	DESIGNATION	PERIOD OF SERVICE		MONTHLY RATE	AMOUNT ACCRUED	AMOUNT	AMOUNT	NO.	SIGNATURE
			FROM	ТО	OF PAY	FOR THE PERIOD	DUE	PAID IN CASH		
1	2	3	4	5	6	7	8	9	10	11
1	AKUT, JULIET B.	P1	JAN	DEC		2500	2,500	2,500	1	
2	ABA, JOSE J.	T1	JAN	DEC		2500	2,500	2,500	2	
3									3	
4									4	
5									5	
6									6	
	TOTAL						5,000.00	5,000.00		

(1) I HEREBY CERTIFY on my official oath that the above PAYROLL IS CORRECT, AND that services above stated have been duly rendered. Payment for such services is also hereby approved from the appropriation indicated

JULIET B. AKUT

Principal I

Recommending Approval:

RANDOLPH B. TORTOLA

Schools Division Superintendent

EDILBERTO L. OPLENARIA, EdD, CESOV

Schools Division Superintendent

(2) I HEREBY CERTIFY on my official oath that I have paid in cash to each official and employee whose names appears on the above roll the amount set opposite his name, under column 27, the having signed or marked his name under column 30 above in my presence and at the time that payment was made to him that payment was made to him in acknowledgment of receipt of the money paid him.

PHILLIP LOUI A. DAGOC, CPA

Provincial Accountant

(3) I HEREBY CERTIFY on my official oath that each employee whose name appears on the above roll has been paid in cash or in check, and in no other mode, the amount shown under column 27 above, opposite his name. The total of the payments made by means this payroll amount to

RONALD JAME D. VIOLON

Provincial Treasurer

Approved:

HON. PETER M. UNABIA

Governor