



Republic of the Philippines
Department of Education
Region XI
SCHOOLS DIVISION OF DIGOS CITY
Digos City



January 18, 2019

Division Memorandum
No. 066 s. 2019

**REQUEST FOR SUBMISSION OF DATA ON VISUALLY IMPAIRED
AND LOW VISION LEARNERS AND TEACHERS**

TO: BEVERLY S. DAUGDAUG, Ed.D
Chief, Curriculum Implementation Division

All Public Schools District Supervisors
All Elementary and Secondary School Heads

1. Herewith is the Unnumbered Regional Memorandum dated January 15, 2019, from the office of Atty. Alberto T. Escobarte, CESO III, re: **"Request for Submission of Data on Visually Impaired and Low Vision Learners and Teachers"**, to provide the Division Office the data on visually impaired and low vision learners and teachers on or before January 17, 2019 using the attached templates, as basis for the allocation of learning resources.
2. Please send email the said data to ddv_ad2008@yahoo.com on or before January 17, 2019.
3. For information, guidance and immediate compliance.

WINNIE E. BATOON, Ed D *WEB*
Officer-in-Charge
Office of the Schools Division Superintendent

for and in the absence of the
Schools Division Superintendent

SOLLIE B. OLIVER, LLB
SOLLIE B. OLIVER, LLB
Chief ES-SGOD

DepEd Schools Division of Digos City

RECORDS SECTION

RELEASED 26488

DATE: 21 JAN 2019 TIME: 3:31

BY: *[Signature]*

Encls.: Templates for the Data
References: Unnumbered Regional Memorandum
To be indicated in the Perpetual Index under the following subjects:
CURRICULUM SPED Data Gathering
RCA: Request for Submission of Data on Visually Impaired and Low Vision Learners and Teachers

January 18, 2019

VISUALLY IMPAIRED/ LOW VISION/ WITH LEARNING DISABILITY

SY 2018 - 2019

DIGOS CITY

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VISUALLY IMPAIRED/ LOW VISION/ WITH LEARNING DISABILITY

School Year:

SY 2018 - 2019

Region:

XI

Division

DIGOS CITY

District:

School ID:

School:

School Address:

[illegible]

VISUALLY IMPAIRED/ LOW VISION/ WITH LEARNING DISABILITY

School Year: **SY 2018 – 2019**

Region: **XI**

Division: **DIGOS CITY**

District: _____

School ID: _____

School: _____

School Address: _____

Impairment	Number of Learners			Needed Materials					
	Male	Female	TOTAL	Large Print			Talking Book	Tactile	Braille
5. Industrial Arts				Size 16 font	Size 18 font	Size 20 font			
	Visually Impaired								
	Low vision								
With Reading Disability									
III. SPORTS TRACK									
Visually Impaired									
Low vision									
With Reading Disability									
IV. ARTS & DESIGN TRACK									
Visually Impaired									
Low vision									
With Reading Disability									
Grade 12									
I. ACADEMIC TRACK									
1. ABM									
Visually Impaired									
Low vision									
With Reading Disability									
2. HUMMS									
Visually Impaired									
Low vision									
With Reading Disability									
3. STEM									
Visually Impaired									
Low vision									
With Reading Disability									

VISUALLY IMPAIRED/ LOW VISION/ WITH LEARNING DISABILITY

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District:

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School Address:

[illegible]

VISUALLY IMPAIRED/LOW VISION/ WITH LEARNING DISABILITY

School Year: **SY 2018 - 2019**

Region: **XI**

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District:

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School:

School Address:

[illegible]

