Attachment C to DM No. \_\_\_\_\_\_\_ s., 2015

**ACTION PLAN: KINDERGARTEN CATCH UP PROGRAM**

District:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ACTIVITIES | TARGET PARTICIPANTS/ CLIENTELE | PROCESSES | TARGET DATE | NEEDED RESOURCES | SOURCE OF THE NEEDED RESOURCES |
| MATERIALS | FUND |
| 1. MAPPING
 |  |  |  |  |  |  |
| 1. ADVOCACY/SOCIAL MOBILIZATION
 |  |  |  |  |  |  |
| 1. CAPACITY BUILDING
 |  |  |  |  |  |  |
| 1. IMPLEMENTATION

(refer to the table below, use a separate sheet) |  |  |  |  |
| 1. MONITORING
 |  |  |  |  |  |  |

**KCEP IMPLEMENTATION**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| School | No. of  | Mode of Delivery | Venue | Teacher Facilitator | Reward System (honorarium, service credits, etc.) |
|  | Classes | Pupils |  |  |  |  |
|  |  |  |  |  |  |  |

Prepared by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Certified true and correct:

 Signature over Printed Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Designation Coordinating Principal

Date:­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_