



Republic of the Philippines
DEPARTMENT OF EDUCATION
Negros Island Region

SCHOOLS DIVISION OF NEGROS ORIENTAL

Capitol Area, Dumaguete City

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January 24, 2017

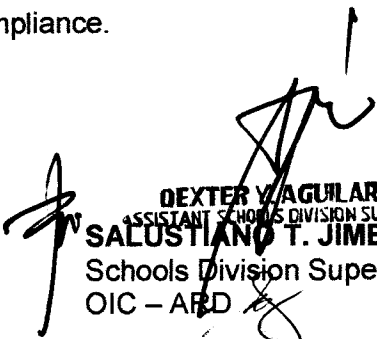
DIVISION MEMORANDUM

No. 27 ; s. 2017

SUBMISSION OF RADAR 1 AND 2 FOR SCHOOLS AFFECTED BY HEAVY RAINS AND FLOODING DUE TO LOW PRESSURE AREA AND TAIL END OF A COLD FRONT

TO : ASDS, Education Program Supervisors/Division Coordinators
Public Schools District Supervisors/Districts-In-Charge
Public Elementary and Secondary School Heads
District and School DRRM Coordinators
All Others Concerned

1. In relation with the heavy rains and flooding experienced by most of the schools in our division due to the recent Low Pressure Area and Tail End of a Cold Front, **all schools are requested to send RADaR 1 and 2** through SMS at DRRMS Feedback Numbers: **Globe - 0915 178 9312 or Smart - 09288718053** following the format given in the template.
2. Attached is the Revised Rapid Assessment of Damage Report 1 and 2, which is self-explanatory.
3. All school heads/school DRRM Coordinators must accomplish the attached report template and submit it to the Division Office.
4. For your guidance and immediate compliance.


DEXTER V. AGUILAR, CESE
ASSISTANT SCHOOLS DIVISION SUPERINTENDENT
SALUSTIANO T. JIMENEZ, CESO VI
Schools Division Superintendent
OIC - ARD

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25 JAN 2017



Department of Education

Revised Rapid Assessment of Damages Report 1 (RADaR 1) as of January 2015 School-Level Form

Instructions to School Heads:

1. Accomplish this form on rapid assessment of damages. **Do not leave anything blank.**
2. Send via text message (SMS) to Globe/Smart. The answers should be sent using the following format:
RADAR1,<Name of incident>,<EBEIS School ID>,<Incurred damages because of incident? (Yes/No)>,<Number of totally damaged classrooms>,<Number of classrooms with major damage>,<Number of classrooms with minor damage>,<Number of temporary learning spaces needed for resumption of classes>,<Number of deceased personnel>,<Number of injured personnel>,<Number of missing personnel>,<Number of displaced personnel>,<Number of classrooms used for evacuation of families>,<Are there still evacuees after three days? (Yes/No)>,<Full name of sender>,<Designation>

For example: **RADAR1,Luis,102121,No,0,0,0,0,0,0,0,0,0,Orville Benigno,HT**

RADAR1,Mayon Eruption,199991,No,0,0,0,0,0,0,0,4,4,Yes,Jose Garcia III,MT

Send it to 09288718053(Smart) or 09151789312(Globe). **Invalid text messages, and forms sent via e-mail or fax shall not be processed.** Kindly check the following before sending: (1) Only the answers are typed, no need to input questions; (2) No spaces between commas; and, (3) **RADAR1** and **SCHOOL ID** is indicated. By sending this form via SMS, please note that the sender is certifying that the information sent is true and accurate. Any inaccurate and incorrect information shall be the responsibility of the sender.

Instructions to Divisions:

A link to the consolidated RADaR shall be given to divisions so that they can check the RADaR1 data sent by school heads. Divisions are in-charge of ensuring all affected schools send RADaRs via SMS and shall be responsible for schools without reports. Only divisions with DepEd e-mail accounts can access and check the RADaR submissions of schools. For divisions without DepEd e-mail accounts, kindly inquire with your ICT Coordinators on how to register for a DepEd e-mail account.

For inquiries about this form, contact DRRMO at (02) 637-4933 and/or (02) 635-3764.

Division: _____

#	QUESTIONS	ANSWERS
1	Name of incident (Can be name of tropical cyclone, name of volcano or description of incident)	
2	EBEIS SCHOOL ID	
3	Incurred damages because of incident? (Indicate Yes/No only)	
4	Number of academic classrooms that are totally damaged (damaged academic classrooms that cannot be used)	
5	Number of academic classrooms with major damage (damaged academic classrooms needing major repair and cannot be repaired by school)	
6	Number of academic classrooms with minor damage (damaged academic classrooms needing minor repair that can all be repaired by school)	
7	Number of temporary learning spaces (TLS) needed for immediate class resumption	
8	Number of deceased DepEd teaching and non-teaching personnel	
9	Number of injured DepEd teaching and non-teaching personnel	
10	Number of missing DepEd teaching and non-teaching personnel	
11	Number of displaced DepEd teaching and non-teaching personnel	
12	Number of academic classrooms used for evacuation of families (all academic classrooms used since Day 1)	
13	Are there still evacuees after three days? (Indicate Yes/No only)	

By sending this RADaR via SMS, I hereby certify that the information sent is true and accurate.

(14) **Full Name** of sender _____ Date _____

(15) **Designation** of sender _____ Contact Number _____



Department of Education
Revised Rapid Assessment of Damages Report 2 (RADaR 2) as of January 2015
School-Level Form

Instructions to School Heads:

1. Accomplish this form on rapid assessment of damages. **Do not leave anything blank.**
2. Send via text message (SMS) to Globe/Smart. The answers should be sent using the following format:
RADAR2,<Name of Incident>,<School ID>,<Number of damaged school furniture (armchairs)>,<Number of damaged copies of learning materials/textbooks used for instruction>,<Number of damaged sets of computer equipment used for instruction>,<Full name of sender>,<Designation>

**For example: RADAR2,Bush Fire,300461,23,45,0,Juan Dela Cruz Jr,Principal
 RADAR2,Luis,102121,0,0,0,Orville Benigno,HT**

Send it to **09288718053**(Smart) or **09151789312**(Globe). Invalid text messages, and forms sent via e-mail or fax shall not be processed. Kindly check the following before sending: (1) Only the answers are typed, no need to input questions; (2) No spaces between commas; and, (3) **RADAR2** and **SCHOOL ID** is indicated. By sending this form via SMS, please note that the sender is certifying that the information sent is true and accurate. Any inaccurate and incorrect information shall be the responsibility of the sender.

Instructions to Divisions:

A link to the consolidated RADaR shall be given to divisions so that they can check the RADaR2 data sent by school heads. Divisions are in-charge of ensuring all affected schools send RADaRs via SMS and shall be responsible for schools without reports. Only divisions with DepEd e-mail accounts can access and check the RADaR submissions of schools. For divisions without DepEd e-mail accounts, kindly inquire with your ICT Coordinators on how to register for a DepEd e-mail account. **Divisions are advised to make the necessary detailed assessment for reports received under RADaR2.** They are also advised to send the consolidated detailed assessment to respective DepEd Offices (cc: drmo@deped.gov.ph).

For inquiries about this form, contact DRRMO at (02) 637-4933 and/or (02) 635-3764.

Division: _____

#	QUESTIONS	ANSWERS
1	Name of incident (Can be name of tropical cyclone, name of volcano or description of incident)	
2	EBEIS SCHOOL ID	
3	Number of damaged school furniture (armchairs) that needs to be replaced for use of learners (<i>Additional information on damaged teachers' tables and chairs, tables and chairs for Kinder, and/or desktops shall be consolidated by respective divisions. Divisions shall endorse the detailed assessment to respective DepEd offices for proper intervention.</i>)	
4	Number of copies of learning materials/textbooks used for instruction that were damaged because of incident (<i>Detailed information on number of copies needed for instruction per grade level and subject area shall be consolidated by respective divisions. Divisions shall endorse the detailed assessment to respective DepEd offices for proper intervention.</i>)	
5	Number of sets of computer equipment used for instruction that were heavily damaged because of incident (<i>Detailed information on type of equipment damaged shall be consolidated by respective divisions. Divisions shall endorse the detailed assessment to respective DepEd offices for proper intervention.</i>)	

By sending this RADaR via SMS, I hereby certify that the information sent is true and accurate.

(6) Full Name of sender _____ Date _____

(7) Designation of sender _____ Contact Number _____