



Republic of the Philippines  
**Department of Education**

REGION XII  
SCHOOLS DIVISION OF SOUTH COTABATO

Office of the Schools Division  
Superintendent

29 Aug 2023

DIVISION MEMORANDUM  
SGOD No. **106** s. 2023

SUBMISSION OF MASTERLIST OF BENEFICIARIES FOR SCHOOL-BASED  
FEEDING PROGRAM (SBFP) SY 2023-2024

To: Public Schools District Supervisors/Principals In-Charge  
Public Elementary School Heads  
School Health Section Personnel  
All Others Concerned

1. In reference to DepED Order No. 39 s. 2017 titled **Operational Guidelines on the Implementation of School-Based Feeding Program for School Years 2017-2022**, schools are directed to submit the list of target beneficiaries before the start of feeding.
2. Total number of beneficiaries will be based on the number of **Severely Wasted, Wasted, Stunted** and **Severely Stunted** learners from the Nutritional Status Report submitted last June-July 2023. Anent this, schools, through their School Head or SBFP Coordinator, are requested to submit the following forms in hard copy to the School Health Section Personnel assigned in the District.
  - a. **SBFP Form 1** – Masterlist of Beneficiaries for School-Based Feeding Program (SBFP)
  - b. **SBFP Form 2** – School-Based Feeding Program List of Schools
  - c. **SBFP Form 3** – School-Based Feeding Program (SBFP) Summary of Beneficiaries and Start of Feeding
3. The deadline of submission of SBFP Forms 1, 2, and 3 will be on **September 8, 2023**. School Heads or School SBFP Coordinators are requested to secure a copy of SBFP Forms 1, 2, and 3 from their District Nurses.
4. For clarifications, personnel concerned may contact **Angelo O. Facunla, RN** – Division SBFP Coordinator at cellphone number **0908-216-3489** or the **Nurse assigned in the District**.

SDOSC-OSDS-DIO-NM-v3.0r0.0, effective 04/06/2020



Address: Alunan Avenue, Koronadal City, South Cotabato 9506  
Telephone Number: (083)228-3801  
Email Address: [south.cotabato@deped.gov.ph](mailto:south.cotabato@deped.gov.ph)





Republic of the Philippines  
**Department of Education**  
REGION XII  
SCHOOLS DIVISION OF SOUTH COTABATO

---

5. Immediate dissemination of this memorandum is directed.

  
**LEONARDO M. BALALA, CESE**  
Schools Division Superintendent

Encl.: As stated

Reference: DO 39, S. 2017

To be indicated in the Perpetual Index  
under the following subjects:

FORMS      LISTS

AOF/DM- submission of masterlist of beneficiaries for SBFP SY 2023-2024  
0000/August 29, 2023

*SDOSC-OSDS-DIO-NM-v3.0r0.0, effective 04/06/2020*



**Address:** Alunan Avenue, Koronadal City, South Cotabato 9506  
**Telephone Number:** (083)228-3801  
**Email Address:** [south.cotabato@deped.gov.ph](mailto:south.cotabato@deped.gov.ph)



**SBFP Form 1 (2020)**



Department of Education  
Region \_\_\_\_



**Master List Beneficiaries for School-Based Feeding Program (SBFP) (SY \_\_\_\_\_)**

Division/Province: \_\_\_\_\_

Name of Principal : \_\_\_\_\_

City/ Municipality/Barangay : \_\_\_\_\_

Name of Feeding Focal Person : \_\_\_\_\_

Name of School / School District : \_\_\_\_\_

School ID Number: \_\_\_\_\_

No.	Name	Sex	Grade/ Section	Date of Birth (MM/DD/YYYY)	Date of Weighing / Measuring (MM/DD/YYYY)	Age in Years / Months	Weight (Kg)	Height (cm)	BMI for 6 y.o. and above	Nutritional Status (NS)		Dewormed? (yes or no)	Parent's consent for milk? (yes or no)	Participation in 4Ps (yes or no)	Beneficiary of SBFP in Previous Years (yes or no)
										BMI- A	HFA				

Prepared by:

Approved by:

\_\_\_\_\_  
Feeding Focal Person

\_\_\_\_\_  
School Head

**Note: This form shall be prepared by the school before the start of feeding to be compiled by the SDO.**



Department of Education  
Region \_\_\_\_



**SCHOOL-BASED FEEDING PROGRAM (SBFP) LIST OF SCHOOLS (SY\_\_\_\_\_)**

Division/Province: \_\_\_\_\_

School District/City/ Municipality : \_\_\_\_\_

Name of Schools	BEIS ID No.	School Address	Name of Barangay	Name of District Supervisors/ School Principal or OICs	Contact Number or & Email Address	Total Beneficiaries

Prepared by:

Approved by:

\_\_\_\_\_  
SBFP DepED Focal

\_\_\_\_\_  
Schools Division Superintendent

**Note: This form shall be prepared by the SDO before the start of feeding, for final consolidation by the RO.**



Department of Education  
Region \_\_\_\_



**SCHOOL-BASED FEEDING PROGRAM (SBFP) SUMMARY OF BENEFICIARIES & START OF FEEDING (SY \_\_\_\_\_)**

Division/Province: \_\_\_\_\_

City/ Municipality/Barangay : \_\_\_\_\_

Name of School / School District : \_\_\_\_\_

School ID Number: \_\_\_\_\_

Date of Start of Feeding: \_\_\_\_\_

Last Mile School: \_\_\_Y \_\_\_N

Number of Undernourished School Children by Grade Level	Nutritional Status at Start/End of Feeding								No. of Secondary Targets				No. of 4 Learners Dewormed	No. of 4 Ps Beneficiaries	No. of Pupils who are beneficiaries in previous years (Repeaters)	Date Feeding Started/Ended
	SW	W	N	OW+O	SS	S	N	T	No. of Pupils-at-risk-of-dropping-out (PARDOS)	No. of Stunted/ Severely Stunted	No. of Indigent Learners	No. of Indigeno us Peoples (IPs)				
1. Kinder																
2. Grade I																
3. Grade II																
4. Grade III																
5. Grade IV																
6. Grade V																
7. Grade VI																
<b>Total</b>																

Prepared by: \_\_\_\_\_

Approved by: \_\_\_\_\_

---

SBFP DepEd Focal

---

School Head

**Note: This form shall be prepared by the school before the start of feeding and after feeding, to be compiled by the SDO, and for final compilation by the RO, for submission to DepEd BLSS-SHD**