**ACTIVITY COMPLETION REPORT**

1. TRAINING PROGRAM TITLE:
2. PROPONENT:
3. SCHOOL/ MUNICIPALITY/ OFFICE:
4. DATE CONDUCTED:
5. VENUE:
6. NO. OF PARTICIPANTS:

|  |  |  |  |
| --- | --- | --- | --- |
|  | Male | Female | Subtotal |
| Teaching |  |  |  |
| Non-teaching |  |  |  |
|  |  | Total |  |

1. OBJECTIVES OF THE TRAINING
2. EXECUTIVE SUMMARY

In paragraph form, include general comments, issues encountered, and how have you solved it, records of discussion during the open forum, among others.

1. M&E ANALYSIS BASED FROM QATAME TOOLS USED (c/o QATAME Associates)
2. RECOMMENDATION (c/o QATAME Associates)

PREPARED BY: <<FULL NAME AND SIGNATURE OF PROPONENT>>

<<Position/ Designation of Proponent>>

<<School/ Office/ Unit/ Section of Proponent>>

<<Date of AC Report Preparation>>

**LIST OF ACTUAL ATTENDEES**

Title of Training:

Tracking Number:

|  |  |  |
| --- | --- | --- |
| **NAME** | **ACTUAL NUMBER OF TRAINING HOURS ATTENDED** | **CERTIFICATE CONTROL NUMBER** |
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