SY \_\_\_\_\_\_\_\_\_\_\_\_\_\_, 3rd Quarter

To the DSA Chief:

This is to report that of the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ students of Batch \_\_\_\_\_\_\_\_\_\_\_\_\_ who have undertaken the SCALE Program since their 11th Grade, \_\_\_\_\_\_\_\_\_\_\_\_\_\_ have satisfactorily completed the Program.

The following students have yet to satisfactorily complete the Program and will have the 4th quarter to do so:

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Student | Name of SCALE Adviser | Strands that needs to be addressed | Learning Outcomes that needs to be addressed |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |
| 5. |  |  |  |
| 6. |  |  |  |
| 7. |  |  |  |
| 8. |  |  |  |
| 9. |  |  |  |
| 10. |  |  |  |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and Signature of SCALE Coordinator Date of Submission