



Republic of the Philippines
Department of Education
Region VI-Western Visayas
SCHOOLS DIVISION OF KABANKALAN CITY

**Office of the Schools Division
Superintendent**

DIVISION MEMORANDUM

NO. 301, s. 2021

NOVEMBER 29 2021

**IMPLEMENTATION OF SCHOOL-BASED FEEDING PROGRAM MILK FEEDING
COMPONENT (POWDERED MILK) FOR SY 2021**

To: OIC-Asst. Schools Division Superintendent
CID & SGOD Chiefs
Public Schools District Supervisors
All Elementary School Heads
All School-Based Feeding Program Coordinators (Alaska Beneficiaries)
All Others Concerned

1. This Office shall implement the School-Based Feeding Program in compliance with DO 031, s. 2021 titled Operational Guidelines on the Implementation of School Based Feeding Program *and Schools* based on the DOH Administrative Order No. 2020-0015 or the *Guidelines on the Risk-Based Public Health Standards for COVID-19 Mitigation*.

2. There are 5 designated Drop Off Locations namely:

DISTRICT	SCHOOL
K-1	KABANKALAN NATIONAL HIGH SCHOOL
K-2	TAMPALON ES
K-3	TAPI ES
K-4	TABUGON ES
K-5	FLORENTINO GALANG SR. NHS- MAIN CAMPUS

3. The Powdered Milk donated by Alaska Corporation as part of 2021 milk feeding implementation will be delivered on 2 batches by the courier from Alaska Warehouse. The first batch shall deliver **on November 29, 2021** for all Drop- Off Locations. The second batch of delivery will be on February 2022. The schedule of drop-off for second batch locations will be announced later.



Address: Tayum Street, Barangay 8, Kabankalan City, Negros Occidental
Telephone Number: 471-2004 | 471-2003
E-mail: kabankalan.city001@deped.gov.ph



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4. Authorized school representative assigned to pick up milk supplies is requested to be at the Drop-Off Location at 8:00 a.m.-11:00 a.m. An authorization letter is needed if the person is not the SBFP-Milk Component Coordinator. All allotted milk supplies for each school shall be picked up before noon of the scheduled date. Division nurses will be assigned to each drop-off location to facilitate distribution.

5. Schools shall ensure proper storage of milk products following the requirements: clean and dry place, avoid direct sunlight, avoid the products being wet, follow the First Expiry, First Out (FEFO) and stacked at maximum of 5 cases high and preferably not touching the floor.

6. Any adverse reaction regarding this milk feeding program component must be properly documented and reported to the schools division, through the Health and Nutrition Unit.

7. School-based milk feeding implementers are requested to check the Official Milk Coordinator (Alaska Beneficiaries) groupchat daily for updates and announcement. Implementers are to secure consent and waiver form (Enclosure No. 1) using the form provided prior to the implementation of the program. Parent's/guardians signatures should be fill out using the waiver provided by Alaska. (Enclosure No. 2). Inventory Form Report should be filled-out every delivery and (Enclosure No.3) Wrapper Redemption Monitoring Form.

8. The transportation expenses to cover travel, hauling and other school expenses relative to the implementation of the program shall be downloaded to schools.

9. School heads are enjoined to extend full administrative support, CID and SGOD personnel shall monitor the implementation of the SBFP-Milk Feeding Component.

10. The donated products are NOT MEANT TO BE RESOLD or distributed to other beneficiaries or organizations.





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11. For more information, contact Mary Jane H. Butanas, RN at 09998234227 and Alma Vannessa G. Tanwani, RN at 09125915008 from the Health and Nutrition Unit.

12. Immediate dissemination of and compliance with this memorandum are desired.

NICASIO S. FRIO, CESO VI
Assistant Schools Division Superintendent
Officer-in-Charge
Office of the Schools Division Superintendent
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Enclosures:
As stated

References:

- DO 031, S. 2021 - OPERATIONAL GUIDELINES ON THE IMPLEMENTATION OF THE SCHOOL-BASED FEEDING PROGRAM FOR SCHOOL YEAR 2021-2022
- DO 037, S. 2020 SUPPLEMENTAL GUIDELINES TO DEPED ORDER NOS. 022 AND 023, S. 2020 (IMPLEMENTATION OF SCHOOL-BASED FEEDING PROGRAM)

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

- Health Education
- Learners
- Policy Programs
- Schools





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CONSENT AND WAIVER FORM

Name of Child/Participant: _____

Age: _____

Sex: _____

Grade: _____

Name of School: _____

Name of Parent / Guardian: _____

Address: _____

Mobile No.: _____

Being the parent/legal guardian of the child, I hereby give my full consent and approval for him/her to participate in the School Milk Feeding Program, a nutrition program initiated by Alaska Milk Corporation (the "Company") in partnership with, and under the direction of, the Department of Education ("DepEd") (the "Program").

By allowing my child to join the Program, I confirm, to the best of my knowledge, that my child is in good health, and does not have lactose intolerance, any food or milk allergy, or dietary restrictions.

I confirm that I have read and fully understood the mechanics of the Program, and all the rules and guidelines imposed by DepEd and/or the Company for the proper implementation of the Program and the preparation of milk at home. I agree to strictly comply with the instructions of [DepEd and/or the Company] for the proper handling, storage and preparation of milk at home. I also warrant that the milk product to be received shall only be given to the participant named above. I shall not give, prepare or offer the milk product to any other child in violation of the rules of the Program or any applicable law, such as E.O. No. 51 (Milk Code of the Philippines).

I hereby agree that any personal information about me and/or my child, which the Company may obtain or collect pursuant to the Program, may be used by the Company for the proper implementation of Program in accordance with the relevant laws and rules on privacy, as well as the Company's Privacy Statement.

In exchange for allowing my child to participate in the Program, I hereby agree to release from liability, indemnify and hold harmless the Company, or any of its officers, stockholders, employees, agents or representatives acting within the scope of their duties, from and against any and all claims, demands, losses, damages, costs and expenses (including attorney's fees), liabilities or causes of action or inconsequential damages, or from or any injury or illness, arising directly or indirectly from, or in connection with, my child's participation in the Program. This release shall be binding upon the Participant, the parent(s) or guardian(s), any successors in interest, and/or any person(s) suing on the minor's behalf.

Signature of Parent/ Guardian: _____

Date: _____



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KASULATAN NG PANGSANG-AYON AT PAGWAWAKSI

Pangalan ng kalahok : _____

Edad: _____

Kasarian: _____

Baitang: _____

Pangalan ng Paaralan: _____

Pangalan ng Magulang/Tagapag-alaga: _____

Tirahan: _____

Numero ng Telepono: _____

Bilang magulang o ligal na tagapag-alaga ng bata, binibigay ko ang aking pahintulot at pag-apruba para lumahok ang aking anak o inaalagaang bata sa School Milk Feeding Program, isang programang nutrisyon na pinagunahan ng Alaska Milk Corporation (ang "Kumpanya") sa pakikipagtulungan ng Department of Education ("DepEd").

Sa pamamagitan ng pagpayag sa aking anak o inaalagaang bata na sumali sa Programa, kinukumpirma ko, sa abot ng aking pagkakaalam, na siya ay nasa mabuting kalusugan, at walang *Lactose Intolerance*, anumang *allergy* sa pagkain o gatas at anumang limitasyon sa pagkain.

Kinukumpirma ko na nabasa ko at lubos kong naintindihan ang proseso ng Programa, at lahat ng mga patakaran at patnubay na inilatag ng DepEd at ng Kumpanya para sa wastong pagpapatupad ng Programa at ang paghahanda ng gatas sa bahay. Sumasang-ayon ako na mahigpit kong susundin ang mga tagubilin ng DepEd at ng Kumpanya para sa wastong paghawak, pag-iimbak at paghahanda ng gatas sa bahay. Ginagarantiyahan ko rin na ang produktong gatas na tatanggapin ko ay hindi ko ibebenta at ibibigay lamang sa kalahok na pinangalanan sa itaas. Hindi ako magbibigay, maghanda o mag-aalok ng produktong gatas sa ibang bata na hindi kalahok sa programang ito alinsunod sa mga patakaran ng Programa o anumang naaangkop na batas, tulad ng E.O. No. 51 (Milk Code ng Pilipinas).

Sumasang-ayon ako na ang anumang personal na impormasyon tungkol sa akin at sa aking anak o inaalagaang bata, na maaaring makuha o kolektahin ng Kumpanya at ng DepEd ay maaaring gamitin para sa maayos na implementasyon ng Programa na ito alinsunod sa mga nauugnay na batas at alituntunin tungkol sa privacy, pati na rin ang Pahayag sa Privacy ng Kumpanya.

Bilang kapalit ng pagpayag sa aking anak o inaalagaang bata na lumahok sa Programa, sumasang-ayon ako na alisin mula sa pananagutan at bayarin ang Kompanya, o alinman sa mga opisyal, stockholder, empleyado, ahente o kinatawan na kumikilos sa loob ng saklaw ng kanilang mga tungkulin, mula sa at laban sa anuman at lahat ng mga paghahabol, hinihingi, pagkalugi, pinsala, gastos (kabilang ang bayad sa abugado), pananagutan o sanhi ng pagkilos o hindi kadahilanang pinsala, o mula sa anumang pinsala o karamdaman, na nagmumula nang direkta o hindi direkta mula sa, o kaugnay sa pakikilahok ng bata sa Programa. Ang waiver form na ito ay dapat nagbubuklod sa Kalahok, mga magulang o tagapag-alaga o sinumang (mga) tao na nag-demanda sa ngalan ng menor de edad.

Lagda ng Magulang o Tagapag-alaga: _____

Petsa: _____



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