**MONTHLY INSTRUCTIONAL SUPERVISORY AND TECHNICAL ASSISTANCE PLAN**

Division: ${division}

Section/Unit: CID

District/Learning Area: ${district}

Month: May

Year: 2025

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| DATE | Instructional Supervisory and Monitoring Activity | School | School Head | Remarks |
| May 02, 2025 | ${instructional\_supervisory\_and\_monitoring\_activity#1} | ${school#1} | ${school\_head#1} | ${remarks#1} |
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Prepared by: Noted by:

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Name of Employee Immediate Superior

Date: Date: