



Republic of the Philippines
Department of Education
REGION III-CENTRAL LUZON

(DepEd Order No. 135, s. 2011)

PROCESSING CHECKLIST FOR THE IMPLEMENTATION OF THE SPECIAL PROGRAM IN THE ARTS

School: _____ School Year: _____
School Address: _____ Contact Numbers: _____
Name of School Head: _____ Designation: _____

REQUIREMENTS

- _____ 1. Letter of Intent / Application Letter (include the Rationale of the Program Implementation)
- _____ 2. Objective of the Program
- _____ 3. A. Screen/Selection Procedures conducted
_____ HSO II (High School Occupational Interest Inventory)
B. Assessment Tool in Identifying Qualified Learners
_____ Arts Test/Performance Skill (Assessment Results)
_____ Interview (List of Qualified Learners with complete address and LRN)
- _____ 4. Arts Discipline Offered
_____ Vocal Music _____ Visual Arts _____ Creative Writing _____ Dance
_____ Instrumental Music _____ Theatre Arts _____ Media Arts
_____ Specify (Art Discipline not stated above)
- _____ 5. Prospective students by area of specialization

	Vocal Music	Instrumental Music	Visual Arts	Theatre Arts	Creative Writing	Media Arts	Dance	TOTAL
Male								
Female								
Total								

- _____ 6. No. of SPA Teacher specialist in different Art Discipline
_____ Vocal Music _____ Visual Arts _____ Creative Writing _____ Dance
_____ Instrumental Music _____ Theatre Arts _____ Media Arts
_____ Specify (Art Discipline not stated above)
- _____ 7. Class Program showing/indicating SPA classes per Arts discipline (120 minutes/day) and Teacher's Program
8. List of Teacher's Profile with Transcript of Records (TOR) to be certified by the School Head
_____ Course _____ Specialization/Major _____ Eligibility
9. Certificates of seminars/trainings attended relative to Arts Discipline taught.

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10. SPA building or classrooms

_____ Dance studio _____ Music room _____ Art room
_____ Drama room _____ Practice room _____ Computer room

11. List of facilities, equipment, furniture, supplies and materials classified by area of Arts Discipline (to be certified by the school head).

_____ Include the list of
Instructional Materials, equipment, furniture, supplies and materials by area of Arts Discipline

ex. Dance

- a. Classroom Studio
- b. Barres
- c. Cabinets for costumes

FINDINGS:

RECOMMENDATIONS:

Prepared by:

_____ School Principal

(Date): _____

Contact No.: _____

Processed & Evaluated by:

_____ SDO SPA Focal Person

_____ SGOD ME Focal Person

Recommending Approval:

_____ Schools Division Superintendent

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Validated by:

Education Program Supervisor
Quality Assurance Division, RO3

Approved:

Regional Director

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QAD7-2025

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