



Republic of the Philippines  
**Department of Education**

06 AUG 2015

DepEd O R D E R  
No. **34**, s. 2015

**REVISIONS TO DEPED ORDER NO. 33, S. 2015**  
(Implementation of the School-Based Feeding Program (SBFP)  
for School Year (SY) 2015-2016)

To: Bureau Directors  
Regional Directors  
Schools Division Superintendents  
Heads, Public Elementary Schools  
All Others Concerned

1. The provisions stipulated in the Enclosure of DepEd Order No. 33, s. 2015 entitled **Implementation of the School-Based Feeding Program (SBFP) for School Year (SY) 2015-2016** shall remain in force and in effect, except for the changes stated herein.

- a. **Anent page 13 on Nutritional Assessment and Identification on Beneficiaries**, all concerned are advised that the computation of Body Mass Index (BMI) using the Learner Information System (LIS) will not push through this year. Thus, **Item VIII. 1.d** should be revised and read as follows:

*To ensure accuracy of BMI computation, all schools are enjoined to make use of the BMI software provided in a CD to each schools division office (SDO) by the Department of Education Health and Nutrition Center (DepEd HNC) Unit.*

- b. **Anent page 14 on the Generation of Beneficiaries using the LIS**, likewise, has been put on hold this year. Thus, *this portion should be deleted*. In the meantime, it is hereby reiterated that each school should submit the names of the pupils, nutrition profile, location or school, name and contact number of the school head and/or authorized personnel and district supervisor using SBFP Form 1 (Master List of Beneficiaries for SBFP) duly signed by the school head.

- c. Still **anent to page 14 on the Submission of Forms, Item VIII, 4** should be revised and read as follows:

*All SBFP Form 1 submitted by the schools to the SDO shall be summarized grouped by funding source by the SDOs. The SDO shall also prepare SBFP Form 2 based on EBEIS data. These Form 1 (Summary) and Form 2 shall be then be submitted to the Regional Office for consolidation. The SDO shall likewise provide copies to their partners.*


d. **Anent page 14 on Deworming, Item I.1.a-c** should be revised and read as follows:

1. *It is highly encouraged that beneficiaries undergo deworming prior to feeding in order for them to get the full benefit of the food's nutrients. However, in cases where deworming did not happen prior to feeding, the beneficiaries may still undergo deworming anytime within the first three months of the feeding program.*
2. *Beneficiaries, with their parents' consent, could avail of the mass deworming activity conducted in schools. Teachers may administer the deworming tablets provided that a health personnel (from the school or community) is in the school premises to take action on any adverse event following the deworming.*
3. *The Department of Health (DOH) through the DepEd Regional Health and Nutrition Unit shall provide the deworming medicines, which will be distributed to the SDOs and to schools.*

2. Further, anent to page 4, paragraph 3 on Priority Target Beneficiaries, the following clarification is being made:

*Meanwhile, in the identification of wasted learners' beneficiaries, priority should be given from Kinder to Grade 3 due to high level of drop-out rate, vulnerability to illnesses, and undernutrition at these levels. Moreover, these learners are considered to be at a crucial stage of their mental and physical development.*

3. Immediate dissemination of and strict compliance with this Order is directed.

  
**BR. ARMIN A. LUJSTRO FSC**  
Secretary

Reference:

DepEd Order: (No. 33, s. 2015)

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

AMENDMENTS  
CHANGE  
CLASSES  
FUNDS  
HEALTH EDUCATION  
POLICY  
PROGRAMS  
SCHOOLS

**SBFP Form 1**

Department of Education  
Region \_\_\_\_

**Master List Beneficiaries for School-Based Feeding Program (SBFP)**

Division/Province: \_\_\_\_\_

Name of Principal : \_\_\_\_\_

City/ Municipality/Barangay : \_\_\_\_\_

Name of Feeding Focal Person : \_\_\_\_\_

Name of School / School District : \_\_\_\_\_

School ID Number: \_\_\_\_\_

No.	Name	Sex	Grade/Section	Date of Birth (MM/DD/YYYY)	Date of Weighing / Measuring (MM/DD/YYYY)	Age In Years / Months	Weight (Kg)	Height (cm)	BMI for 6 y.o. and above	Nutritional Status (NS)	Participation in 4Ps (yes or no)	Name of Parents	Beneficiary of SBFP in Previous Years (yes or no)

Prepared by:

Noted by:

(PRINTED NAME AND SIGNATURE)  
Feeding Focal Person

(PRINTED NAME AND SIGNATURE)  
SDS/School Head

**Note: This form shall be submitted to the SDO. A summary of this form shall then be submitted by SDO to RO**

**SBFP Form 2**

Department of Education  
Region \_\_\_\_

**SCHOOL-BASED FEEDING PROGRAM (SBFP) LIST OF SCHOOLS**

Division/Province: \_\_\_\_\_

School District/City/ Municipality : \_\_\_\_\_

Name of Schools	BEIS ID No.	School Address	Name of Barangay	Name of District Supervisors/ School Principal or OICs	Contact Number	Total Beneficiaries

Prepared by:  
  
\_\_\_\_\_  
(PRINTED NAME AND SIGNATURE)  
SBFP DepEd Focal

Noted by:  
  
\_\_\_\_\_  
(PRINTED NAME AND SIGNATURE)  
Unit Chief

**Note: This form shall be prepared by the SDO based on EBEIS data and submit to RO for consolidation**