



Republic of the Philippines
Department of Education
SCHOOLS DIVISION OF MARINDUQUE

Office of the Schools Division Superintendent

MEMORANDUM

SGOD-2025-067

TO: Assistant Schools Division Superintendent
Chief Education Supervisor, CID/OIC, SGOD
Public Schools District Supervisors
Public Elementary and Secondary School Heads
All Others Concerned

FROM: 
LYNN G. MENDOZA, EdD
OIC, Schools Division Superintendent

SUBJECT: **SUBMISSION OF MONTHLY REPORT ON MENTAL HEALTH-RELATED CASES IN SCHOOLS**

DATE: June 18, 2025

1. In support of the Department of Education's commitment to promote learners' mental health and well-being, and in compliance with existing national directives under the School Mental Health Program, this Division, through the School Governance and Operations Division – School Health and Nutrition Section, issues the official template for the Monthly Report on Mental Health-Related Cases in Schools.
2. **Relative to this, each school shall designate a Mental Health Focal Person/Guidance Designate who shall accomplish and submit the report on or before the 5th day of the succeeding month to the SGOD-SH&N through e-mail address maconcordia.ebora@deped.gov.ph.**
3. The official template for the Monthly Report on Mental Health-Related Cases in Schools is attached as Enclosure 1.
4. Immediate dissemination of and strict compliance with the contents of this Memorandum are desired.

/SGOD-SHN-MCE



Address: T. Roque St., Malusak, Boac, Marinduque
Tel. No.: (042) 754-0247 • Fax No.: (042) 332-1611 Email:
marinduque@deped.gov.ph
Website: <https://depedmarinduque.com>



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School Monthly Mental Health Report Template

Division: _____
 School Name: _____
 School ID Code: _____
 Month & Year: _____
 Prepared By (Focal Person): _____
 Designation: _____
 Contact Number/Email: _____

Grade Level	Gender	Emotional Issues (e.g., anxiety, depression)		Behavioral Issues (e.g., aggression, isolation)	Academic Stress	Bullying / Peer Conflict	Family-Related Problems	Abuse / Trauma (Red-Flag)	Others (specify): _____
		Anxiety	Depression						
Kinder	Male								
	Female								
Grade 1	Male								
	Female								
Grade 2	Male								
	Female								
Grade 3	Male								
	Female								
Grade 4	Male								
	Female								
Grade 5	Male								
	Female								
Grade 6	Male								
	Female								
Grade 7	Male								
	Female								
Grade 8	Male								
	Female								
Grade 9	Male								
	Female								
Grade 10	Male								
	Female								
Grade 11	Male								
	Female								
Grade 12	Male								
	Female								



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Section A: Student Mental Health Case Summary

Concern Category	New Cases	Ongoing Cases	Resolved Cases	Remarks/Actions Taken
Emotional Issues (e.g., anxiety, depression)				
Behavioral Issues (e.g., aggression, isolation)				
Academic Stress				
Bullying / Peer Conflict				
Family-Related Problems				
Abuse / Trauma (Red-Flag)				
Others (specify): _____				

Section B: Referrals and Follow-up

Referral Institution	No. of Students Referred	Feedback Received	Follow-up Completed (Y/N)
School Counselor			
Local Health Center			
Social Welfare / Child Protection			
Private Mental Health Professional			
Other (Specify): _____			

Section C: School-Level Interventions (Tick where applicable)

- Individual Counseling Sessions
- Group Counseling / Peer Support Circles
- Mental Health Awareness Activities
- Parent Consultations/Engagement
- Emergency Intervention for Red-Flag Cases
- Teacher Referrals and Support
- Coordination with LGU / Barangay

Brief Description of Key Activities/Outcomes:



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Section D: Issues and Recommendations

Challenges Encountered:

Support Needed from Division Office:

Section E: Submission Details

Date of Submission: _____

Signature of School Mental Health Focal Person/Guidance Designate: _____

Signature of School Head: _____



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