



MONITORING TOOL - Tile Setting NC II EQUIPMENT

Name of Tool / Equipment /Learner's Material	In the space provided below, marked with a ✓ if the equipment and / or learner's material has been received and mark with × if it was not.	In the space provided below, write the number of the equipment and / or learner's material that has been received	Of the total number received, how many are... (marked with a ✓ in the choices you made. You can have more than one choice)						Do you need training on the use of the equipment / learners' material	Source of Funds (ex. DepEd CO, RO, SDO, School MOOE, LGU or Others (please specify))
			in good working condition?	in need of repair?	broken?	unserviceable?	lost?	others, specify in the space provided below		
1 Chalkline		Pieces								
2 Claw Hammer		Pieces								
3 Diagonal Cutting Plier		Pieces								
4 Faceshield		Pieces								
5 Gloves, Knitted		Units								
6 Hard Hat (Green)		Pieces								
7 Hard Hat (White)		Pieces								
8 Notched Trowel		Pieces								
9 Plumb Bob		Pieces								
10 Pointing Trowel		Units								
11 Portable Electric Grinder		Units								
12 Respirator		Pieces								
13 Rubber Mallet		Pieces								
14 Rubber Squeegee		Pieces								
15 Safety Goggles		Pieces								
16 Safety Shoes		Units								
17 Spirit Level		Pieces								
18 Steel Framing Square		Pieces								
19 Steel Tape Measure		Pieces								
20 Tile Cutter		Pieces								
21 Tile Nipper		Pieces								

REGION: _____
 DIVISION: _____
 SCHOOL: _____
 SCHOOL ID: _____

Prepared by: _____

 SIGNATURE OVER PRINTED NAME
 Teacher