



MONITORING TOOL - Technical Drafting 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?	unservicable?	lost?	others, specify in the space provided below		
1	CAD SOFTWARE			Units								
2	COMPASS			Pieces								
3	DESKTOP COMPUTER			Pieces								
4	DRAWING STOOL			Pieces								
5	DRAWING TABLE			Pieces								
6	DRAWING TEMPLATES			Pieces								
7	ERASER			Pieces								
8	MECHANICAL PENCILS			Pieces								
9	PENCIL SHARPENER			Pieces								
10	PLOTTER			Set								
11	PRINTER			Set								
12	TECHNICAL PENS SET			Pieces								
13	TRAIANGLE SCALE			Pieces								
14	TRIANGE 30X60X90 DEGREES			Pieces								
15	TRIANGLE 45X45X90 DEGREES			Pieces								
16	T-SQUARE			Pieces								

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

Prepared by: _____

SIGNATURE OVER PRINTED NAME
Teacher