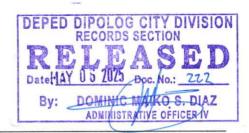


Department of Education

REGION IX – ZAMBOANGA PENINSULA SCHOOLS DIVISION OF DIPOLOG CITY



DIVISION MEMORANDUM No. 222 , s. 2025

GRIEVANCE MACHINERY FORMS

To: Chiefs of the SGOD and CID
Public Schools District Supervisors/District-in-Charge
Elementary and Secondary School Heads
Grievance Committees (School Level, District Level, Division Level)
Teaching and Non-Teaching Personnel
This Division

- In the pursuit of expeditious resolution of grievances pursuant to DepEd Order No. 035, s. 2004 (Revised Grievance Machinery of the Department of Education), all concerned are hereby enjoined to utilize the attached FORM 1 (Grievance Form), FORM 2 (Grievance Agreement/Decision Form), FORM 3 (Certificate of Actions Taken) for all grievances indorsed to the school, district and division levels, in accordance with the Department of Education's grievance machinery.
 - FORM 1 (GRIEVANCE FORM): This FORM is to be completed by the complainant/aggrieved party, outlining the details of the grievance.
 - FORM 2 (GRIEVANCE AGREEMENT FORM): This FORM shall be used to document any agreements reached during the grievance process, if there is any. Both parties are required to sign the document.
 - FORM 3 (CERTIFICATE OF ACTION): Upon resolution of the grievance, this form shall serve as official documentation of the actions taken by the committee
- 2. For information, guidance and strict compliance.

MA. LIZA R. TABILON, CESO V
Schools Division Superintendent









Address: Purok Farmers, Olingan, Dipolog City Email: dipolog.city@deped.gov.ph

Website: www.depeddipolog.net

Facebook: DenEd Tavo - Division of Dinolog City



Department of Education

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GRIEVANCE FORM (Form 1)

Name of Aggrieved Party	Name of Responde	nt
Position/Title/Designation	Position/Title/De	signation
	Office/Section/Sci	hool/District/Division
ISSUE/S:		
ACTIONS DESIDED.		
ACTIONS DESIRED:		
Signature of Aggrieved Party	Received by	Date













Department of Education

REGION IX – ZAMBOANGA PENINSULA SCHOOLS DIVISION OF DIPOLOG CITY

GRIEVANCE AGREEMENT FORM (Form 2)

Name of Aggrieved Party	Name of Respondent	
Position/Title/Designation	Position/Title/Designation	
Title of the Grievance		
SUMMARY:		
SOMMEN.		
DECISION/S:		
AGREEMENT/S:		
We promise to abide by the above-enumerated agreements we made on at at (name of school/office).		
Signature of the Aggrieved Party	Signature of the Respondent	
Witnessed by:		
Witness	Witness	









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Department of Education

REGION IX – ZAMBOANGA PENINSULA SCHOOLS DIVISION OF DIPOLOG CITY

CERTIFICATION (Form 3)

Name of Aggrieved Party	Name of Respondent		
Position/Title/Designation	Position/Title/Designation		
Title of the Grievance			
List of Action/s Taken:			
This certifies that the grievance filed by against on has been acted upon by the Committee on pursuant to DepEd Order No. 035, s. 2004. Issued this in Dipolog City.			
Member, Grievance Committee	e Member, Grievance Committee		
Member, Grievance Committe	Member, Grievance Committee		
Chairman, Grievance Committee			







