Regional Memorandum
No. 109 s. 2023

DISTRIBUTION OF LYSOL HAND SOAP TO PRIORITY SCHOOLS IMPLEMENTING “WASH IN SCHOOLS (WINS)”

To: Schools Division Superintendents

1. Relative to the support of the implementation of Wash In Schools (WINS) in DepEd CALABARZON, the Kabisig ng Kalahi Incorporated, headed by NEDA Private Sector representative Ms. Victoria Wiencke will provide Lysol hand soaps in dispensers in the select schools.

2. The Schools Division Offices, through The Division Partnership Focal Persons or School Health and Nutrition Section, is requested to submit five (5) priority elementary schools with hand washing facilities and to accomplish the attached template for the needed information for the schools.

3. Please submit the reports mentioned above to essd.calabarzon@deped.gov.ph on February 24, 2023.

4. For further inquiries, kindly coordinate with Mr. Elino S. Garcia, PPRD OIC-Chief at 09171585376 or Mr. Michael Girard R. Alba, ESSD Chief, at 09178882731.

5. Other details will be announced through a separate Memorandum.

6. Immediate dissemination of this Memorandum is earnestly desired.

ATTY. ALBERTO T. ESCOBARTE, CESO II
Regional Director

03/ROE1

Address: Gate 2, Karangalan Village, Cainta, Rizal
Telephone Nos.: 02-8682-5773/8684-4914/8647-7487
Email Address: region4a@deped.gov.ph
Website: depedcalabarzon.ph
<table>
<thead>
<tr>
<th>No.</th>
<th>School ID</th>
<th>Name of School</th>
<th>Complete Address</th>
<th>Total Enrollment</th>
<th>School Head</th>
<th>Contact Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Prepared by: 

**NAME**
POSITION/ DESIGNATION
Date: __________

Reviewed by:

**NAME**
Asst. Schools Division Superintendent
Date: __________

Approved (For Submission) by:

**NAME**
Schools Division Superintendent
Date: __________