**ANNEX D\_PMC FORM**

**ANNUAL ACCOMPLISHMENT REPORT**

CY \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Region \_\_\_\_

Name of PM Counselor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Office/Agency Name and Address, if applicable: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total No. of Would-be-Couple (s) served: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total No. of PM Certificates signed and issued: \_\_\_\_\_\_\_\_\_\_\_\_\_

Average appraisal in the Feedback/Satisfaction Survey: \_\_\_\_\_\_\_\_\_\_\_\_\_

**Table 1**

|  |  |
| --- | --- |
| **Age Cluster** | **No. of Couples Served** |
| Above 25 years old |  |
| Above 18 and below 25 years.old |  |
| **TOTAL** |  |

**Table 2: Issues and Concerns**

|  |  |  |
| --- | --- | --- |
| **Issues /Concerns/Problems Encountered** | **Action Taken** | **Recommendations** |
|  |  |  |
|  |  |  |

**Table 3: Over-all Score for Satisfaction Feedback Survey**

|  |  |
| --- | --- |
| **No. of Administered Satisfaction Feedback Survey Form** | **Average Score/Adjectival Rating** |
|  |  |

Key Learning Insights as Counselor

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Prepared by:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature over Printed Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position and Designation

Date Accomplished: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Noted by:**

Supervisor