



## DEPARTMENT OF EDUCATION 2017 NATIONAL SCHOOL CENSUS VOCATIONAL EDUCATION

The Department of Education (DoE) uses an efficient method for gathering data from all schools in the country. Once a year forms are distributed and collected from all schools during School Census Week. This data will be used to chart the progress of the National Education Plan and assist provinces for future education services.

Managers and Manageresses are being asked to fill out these forms accurately and honestly as possible. Hold one copy for your school's record, send one copy to the District Education Officer (DEO) and two copies to the Provincial Education Advisor (PEA). The PEA will verify and send one form to the EMIS and Statistics Unit of DoE as the official record for your school.

The Department wants to thank you in advance for taking time to carefully fill out this form and for assisting us in gathering more accurate and useful data on schools in our country.

### SECTION 1: SCHOOL DETAILS

This first section covers the basic contact details about your school.

1. Vocational Name \_\_\_\_\_ 2. Vocational Code \_\_\_\_\_  
3. Province Name \_\_\_\_\_ 4. Province Code \_\_\_\_\_  
5. District Name \_\_\_\_\_ 6. District Code \_\_\_\_\_  
7. LLG Name \_\_\_\_\_ 8. Ward Name \_\_\_\_\_

9. What is the centre status? *(Tick ✓ the appropriate box)*  Operating  Suspended  Closed

10. Is your centre under National Education System (NES) or a Private centre? *(If you tick ✓ the NES box then answer question 11)*

- National Education System (NES)  Permitted  Private

11. Is your centre registered under the National Education System (NES)? *(Tick ✓ the appropriate box)*

- Yes  No

12. What agency does your centre belong to? *(Tick ✓ the appropriate box)*

- Government  Catholic  Evangelical Alliance  United Church  Lutheran Church  
 Anglican  Seventh Day Adventist  Others: \_\_\_\_\_

13. School sector: *(Tick ✓ the appropriate box)*

- Vocational Centre  Technical High School

14. What is the level of your centre? *(Tick ✓ the appropriate box)*

- 2  3  4  5  6  7  Other: \_\_\_\_\_

15. Where is your centre located? *(Tick ✓ the appropriate box)*

- Urban  Rural

16. Is your centre a: *(Tick ✓ the appropriate box)*

- Day school only?  Boarding only?  Mixed? (Day and Boarding)

17. Vocational Postal Address: \_\_\_\_\_  
\_\_\_\_\_

18. Vocational Phone No: \_\_\_\_\_ 19. Vocational Fax No: \_\_\_\_\_

20. Vocational Email Address: \_\_\_\_\_

**SECTION 2:****SCHOOL FINANCES**

This section covers the money your school received from various sources during 2016. Please be accurate as possible. If your school received no money from a particular source, please indicate with a dash (-) in the box below.

21. How much did your school actually receive from other sources in 2016?

*(Only indicate the income your school received last year and not what it should have received. This should include any money received for ancillary staff salaries, school materials, school buildings, etc.)*

**Source of School Funds****Amount (in Kina)**

National Government subsidies:

K

Provincial Government subsidies:

K

Local-level Government:

K

School fund raising activities:

K

Parents donations:

K

Politicians: \_\_\_\_\_

K

Project Fees:

K

Fees collection:

K

Overseas Donors: \_\_\_\_\_

K

Other: \_\_\_\_\_

K

Sub-total: \_\_\_\_\_

K
K
K
K
K
K
K
K
K
K

**SECTION 3:****STUDENT ENROLMENT / CLASSES / GRADUATES**

This section covers information about the number of programmes and students in your school. Most of this information will be taken from the school attendance books. Questions 23 - 27 ask you to include all students still on the school roll after **March 3rd 2017**. Only question 22 asks you about last year's graduated students.

22. Please indicate the number of students in 2016 who completed their course and attained certificates from your centre by course category.

<b>CATEGORY</b>	<b>ATTAINED CERTIFICATE</b>	<b>MALE</b>	<b>FEMALE</b>	<b>TOTAL</b>
CONVENTIONAL/TRADE (Year 2)	TRADE CERTIFICATE			
TECHNICAL HIGH SCHOOL	ACADEMIC CERTIFICATE			
	TRADE CERTIFICATE			
PETT	PETT CERTIFICATE			
NATIONAL CERTIFICATE 1	NATIONAL CERTIFICATE 1			
NATIONAL CERTIFICATE 2	NATIONAL CERTIFICATE 2			
SHORT COURSES	CERTIFICATE Attained			
OTHER NON-TRADES	CERTIFICATE Attained			
	TOTAL			

23. Indicate the number of students currently boarding at your centre by gender in each course category.

(Enter the number of boarding students only if you ticked "mixed" in question 16 of section 1.)

Category	CONVENTIONAL TRADE				THS (DUAL)				PETT		NC 1		NC 2		OTHERS		TOTAL		
	Year 1		Year 2		Grade 9		Grade 10		Year 1										
Gender	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	T
Student Enrolment																			

24. How many classes does your centre have for each course category?

Category	CONVENTIONAL TRADE				THS (DUAL)				PETT		NC 1		NC 2		OTHERS		TOTAL		
	Year 1		Year 2		Grade 9		Grade 10		Year 1										
No. of Classes																			

25. State the total number of students enrolled in each program, by category and gender. Indicate only relevant programs offered at your centre. (Include all students still enrolled after 3rd March 2017.)

Program	CONVENTIONAL TRADE				THS (DUAL)				PETT		NC 1		NC 2		OTHERS		TOTAL		
	Year 1		Year 2		Grade 9		Grade 10		Year 1										
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	T
Mech./Allied Trades																			
Tourism & Hospitality																			
Build./Allied Trades																			
Metal Trades																			
Electro-technology																			
Elusiness Studies																			
Primary Industry																			
Garment Technology																			
Secretarial																			
Other Non-Trades																			
Short Courses																			
<b>TOTAL</b>																			



**SECTION 4:****SCHOOL INFRASTRUCTURE DETAILS**

This section covers the existing school infrastructure and how well board of management is managing each school.

28. Indicate the number of classrooms, storerooms, offices, staffrooms, staff houses and other buildings in the school.

- Classrooms     Staff houses     Library     Offices     Computer Lab     Workshops  
 Practical Skills Building     Home Economics Building     Others

29. How many classrooms of each type and condition are there? *(Write the number in the boxes provided)*

Building Types	Permanent	Semi-Permanent	Bush Material
<b>Total Classrooms</b>			
How many classrooms require minor repair			
How many classrooms require major repair			

30. What is the number of toilet type(s) the students use?

Toilet Types	Permanent		Semi-Permanent		Bush Material	
	M	F	M	F	M	F
Septic Toilets (Flush/Pour)						
Shore Drop (Solwara)						
Pit Toilets:						
<i>Pit with Cover</i>						
<i>Pit without Cover</i>						
<i>Composting Toilet</i>						
*None						
<b>Total Toilets</b>						

*\*If the school has no toilets, please circle none and do not enter any data.*

31. How many usable toilets does your school have? **Only fill in if your school toilets meet the definition of \*usable.**

*\*Usable means toilets main doors are unlocked, the toilet is not broken, the toilet hole is not blocked, and water is available for flush/pour toilets, and there are closable doors that lock from the inside and no large gaps in the structure at the time of the questionnaire or survey.*

Total Toilets	Male Toilets	Female Toilets	*Common (Shared) Toilets

*\*Common (Shared) Toilets refers to when a school does not have separate toilets for male and female students and just use the same toilet(s) for all students.*

32. Where does the school get most of its drinking water from?

- Town Supply     Tank Water     Piped Water     Bringing water from home  
 Well/Spring [protected/unprotected]  
(Circle one)     Lake, Creek, River, Stream (Circle one)     None

33. Is drinking water from the above main source currently available at the school?     Yes     No

34. Does the school have hand washing facilities with soap and water available? *(Tick one)*

- Yes, with both soap and water     With water only     With soap only     No facilities with soap and water

35. What type of power supply does the school use?

- PNG Power     Solar     Generator     Hydro     Others: \_\_\_\_\_ *(Specify)*

**SECTION 5:****TEACHER INFORMATION**

This section provides key information on each teacher in your school. Fill out as much information as you can. You have to go to each teacher to get this information before completing the form. Also indicate each teacher's position.

The table below is to identify the number of teachers posted in your school with their highest qualification by gender.

No	Qualification	Male	Female
1	Diploma in Vocational Education Teaching (DIVET)		
2	Trade Qualification		
3	Degree (Specify)		
4	Others (Specify)		
<b>Total</b>			

Please indicate the number of teachers in the table below

2017 Number of Teachers		
Male	Female	Total

The table below is only for **registered** teachers who are **retained**.

No	Status	Position Number	Title	File Number	Gender	Grades
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						

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Please fill in the tables below only if the teacher has **upgraded qualification**, the **teacher is new** or **transferred in**.

<b>Teacher #</b>		<b>Position No:</b>			
Surname _____		First Name _____		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth ____/____/____ (Day) (Month) (Year)
				Nationality <input type="checkbox"/> PNG Citizen <input type="checkbox"/> Non PNG Citizen	
TSC File Number _____	Teacher Registration Type ( <i>Tick √ one</i> ) <input type="checkbox"/> Full <input type="checkbox"/> Provisional	Teacher Registration Number _____	Type of Employee ( <i>Tick √ all that apply</i> ) <input type="checkbox"/> TSC Employee <input type="checkbox"/> Non TSC Employee <input type="checkbox"/> TSC Contract <input type="checkbox"/> TSC Volunteer		What year did this teacher start teaching? _____yr
What is the highest teaching qualification obtained? ( <i>Tick √ the highest only</i> ) <input type="checkbox"/> Diploma in Vocational Education Teaching (DIVET) <input type="checkbox"/> Trade Qualification <input type="checkbox"/> Degree ( <i>Specify</i> )			Certificate Number _____ _____ _____	Year of Issue _____ _____ _____	Issuing Institute _____ _____ _____
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Subjects			Grades/Year		

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Subjects			Grades/Year		

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## TEACHER INFORMATION

This section provides key information on each teacher in your school. Fill out as much information as you know. You may have to go to each teacher to get this information before completing the form. Also indicate each teacher's position.

Teacher #			Position No:		
Surname		First Name	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth ____/____/____ (Day) (Month) (Year)	Nationality <input type="checkbox"/> PNG Citizen <input type="checkbox"/> Non PNG Citizen
TSC File Number	Teacher Registration Type ( <i>Tick ✓ one</i> ) <input type="checkbox"/> Full <input type="checkbox"/> Provisional	Teacher Registration Number	Type of Employee ( <i>Tick ✓ all that apply</i> ) <input type="checkbox"/> TSC Employee <input type="checkbox"/> Non TSC Employee <input type="checkbox"/> TSC Contract <input type="checkbox"/> TSC Volunteer		What year did this teacher start teaching? _____yr
What is the highest teaching qualification obtained? ( <i>Tick ✓ the highest only</i> ) <input type="checkbox"/> Diploma in Vocational Education Teaching (DIVET) <input type="checkbox"/> Trade Qualification <input type="checkbox"/> Degree ( <i>Specify</i> )			Certificate Number	Year of Issue	Issuing Institute
What trade does the teacher specialise in? _____		What level of trade? <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	Year teacher sat the trade test _____		Certificate Number _____
What are the current subjects and grades/year is this teacher currently teaching?					
Subjects			Grades/Year		

Teacher #			Position No:		
Surname		First Name	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth ____/____/____ (Day) (Month) (Year)	Nationality <input type="checkbox"/> PNG Citizen <input type="checkbox"/> Non PNG Citizen
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Surname		First Name	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth ____/____/____ (Day) (Month) (Year)	Nationality <input type="checkbox"/> PNG Citizen <input type="checkbox"/> Non PNG Citizen	
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What are the current subjects and grades/year is this teacher currently teaching?				
Subjects		Grades/Year		

- Person filling out this National School Census Form needs to sign off the census forms as being accurate and completed on the spaces provided below;

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date filled out: \_\_\_\_\_

- Senior Standards / Standards Officers (SSO/SO) needs to validate and verify that data captured is complete, correct and accurate.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

- Provincial Education Office needs to certify the form, and stamp it before sending the form to DoE Headquarters.

Standards Officer Stamp

Provincial Education Advisor Stamp