



DEPARTMENT OF EDUCATION 2022 NATIONAL SCHOOL CENSUS ELEMENTARY SCHOOL

The National Department of Education (NDoE) 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.

Teachers in Charge 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 Statistics Branch of NDoE 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. School Name _____ 2. School Code _____
3. Province Name _____ 4. Province Code _____
5. District Name _____ 6. District Code _____
7. LLG Name _____ 8. Ward Name _____

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

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

- National Education System (NES) school Permitted school Private school

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

- Yes No

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

- Government Catholic Evangelical Alliance United Church Lutheran Church
 Anglican Seventh Day Adventist Int'l Education Agency Others: _____

13. What is the level of your school? *(Tick ✓ the appropriate box)*

- 2 3 4 5 Other: _____

14. Where is your school located? *(Tick ✓ the appropriate box)* Urban Rural

15. School Postal Address: _____

16. School Phone No: _____ 17. School Fax No: _____

18. School Email Address: _____

SECTION 2:**SCHOOL FINANCES**

This section covers the money your school received from various sources during 2021. Please be accurate as possible. If your school received no money from a particular source, please indicate with a dash (-) in the box below.

19. How much did your school actually receive from other sources in 2021?

(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)**

Government Tuition Fee 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: _____

SECTION 3:**STUDENT ENROLMENT / CLASSES**

This section covers information about the number of classes, students and teachers in your school. Most of this information will be taken from the school attendance books. Questions 20 - 21 asks you to include all students on the school roll after **4th March 2022**.

20. How many classes, students and teachers does your school have in each grade this year?

(Include all students on the school roll after 4th March 2022. Remember, if a teacher is teaching two grades, then that teacher is 0.5 in each grade. If a teacher is teaching three grades, then that teacher is 0.33 in each grade).

Number of Classes, Students and Teachers by Grade and Gender							
Grade	No. of Classes	2022 Number of Students			2022 Number of Teachers		
		Male	Female	Total	Male	Female	Total
Prep							
E1							
E2							
TOTAL							

21. State the total number of students enrolled in each grade, by year of birth and gender. If you have students born in years not indicated, then fill in those years in the blank spaces below 2008.
(Include all students still enrolled after 4th March 2022)

2022 Number of Students Enrolled by Age									
Year of Birth	Preparatory		Elementary 1		Elementary 2		TOTAL		
	Male	Female	Male	Female	Male	Female	Male	Female	Total
2017									
2016									
2015									
2014									
2013									
2012									
2011									
2010									
2009									
2008									
Total									

(These totals should be the same as the total number of students in each grade from question 20.)

22. Indicate the number of students repeating this year at your school by grade and gender.

2022 Number of Students Repeating				
Gender	Preparatory	Elementary 1	Elementary 2	TOTAL
Male				
Female				
TOTAL				

(These totals should not exceed the total number of students in each grade from question 20 & 21.)

23. Please indicate the number of students with special needs or disabilities at your school by grade and gender.

2022 Number of students with Special Needs or Disabilities					
	Gender	Preparatory	Elementary 1	Elementary 2	TOTAL
Registered with Special Education Resource Centre (SERC)	Male				
	Female				
Not registered with Special Education Resource Centre (SERC)	Male				
	Female				
	TOTAL				

(These totals should not exceed the total number of students in each grade from question 20 & 21.)

SECTION 4: SCHOOL INFRASTRUCTURE DETAILS

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

24. Indicate the number of classrooms, storerooms, offices, staff-rooms, staff houses and other buildings in the school.

Classrooms Staff houses Library Offices Computer Lab Staff-rooms Others

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

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

26. 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						
Total Toilets						

* If school has no toilets, please circle none and leave blank.

27. 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 means when a school does not have separate toilets for male and female students and all students use the same toilet.

28. Where does the school get most of its drinking water from? *(Tick one)*

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

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

30. 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

31. What type of power supply does the school use? *(Tick one)*

PNG Power Solar Generator Hydro Others: _____ *(Specify)*

SECTION 5:

TEACHER INFORMATION

This section provides key information for 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	Elementary Teacher Certificate		
2	Grade 12 Certificate		
3	Grade 10 Certificate		
4	Others (Specify)		
Total			

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

No	Status	Position Number	Title	File Number	National Identity Number	Gender	Grades
1	Retain	10901259	Teacher in Charge	00984762		Male	Prep & E1

No	Status	Position Number	Title	File Number	National Identity Number	Gender	Grades
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							

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

Teacher #		Teacher's Position No:		National Identity Number:		
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 <input type="checkbox"/> Training (yet to graduate)	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"/> Elementary teaching Certificate <input type="checkbox"/> Gr.12 Certificate <input type="checkbox"/> Gr.10 Certificate <input type="checkbox"/> Other (<i>Specify</i>) _____			Certificate Number _____	Year of Issue _____	Issuing Institution _____	
Indicate the grade(s) or class(s) you're taking: _____						

SECTION 5:

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 #		Teacher's Position No:		National Identity Number:		
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 <input type="checkbox"/> Training (yet to graduate)	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"/> Elementary teaching Certificate <input type="checkbox"/> Gr.12 Certificate <input type="checkbox"/> Gr.10 Certificate <input type="checkbox"/> Other (<i>Specify</i>) _____				Certificate Number _____	Year of Issue _____	Issuing Institution _____
Indicate the grade(s) or class(s) you're taking:						

Teacher #		Teacher's Position No:		National Identity Number:		
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 <input type="checkbox"/> Training (yet to graduate)	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"/> Elementary teaching Certificate <input type="checkbox"/> Gr.12 Certificate <input type="checkbox"/> Gr.10 Certificate <input type="checkbox"/> Other (<i>Specify</i>) _____				Certificate Number _____	Year of Issue _____	Issuing Institution _____
Indicate the grade(s) or class(s) you're taking:						

Teacher #		Teacher's Position No:		National Identity Number:		
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 <input type="checkbox"/> Training (yet to graduate)	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"/> Elementary teaching Certificate <input type="checkbox"/> Gr.12 Certificate <input type="checkbox"/> Gr.10 Certificate <input type="checkbox"/> Other (<i>Specify</i>) _____				Certificate Number _____	Year of Issue _____	Issuing Institution _____
Indicate the grade(s) or class(s) you're taking:						

SECTION 5: 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 #		Teacher's Position No:		National Identity Number:		
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 <input type="checkbox"/> Training (yet to graduate)	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"/> Elementary teaching Certificate <input type="checkbox"/> Gr.12 Certificate <input type="checkbox"/> Gr.10 Certificate <input type="checkbox"/> Other (<i>Specify</i>) _____			Certificate Number _____	Year of Issue _____	Issuing Institution _____	
Indicate the grade(s) or class(s) you're taking: _____						

Teacher #		Teacher's Position No:		National Identity Number:		
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 <input type="checkbox"/> Training (yet to graduate)	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"/> Elementary teaching Certificate <input type="checkbox"/> Gr.12 Certificate <input type="checkbox"/> Gr.10 Certificate <input type="checkbox"/> Other (<i>Specify</i>) _____			Certificate Number _____	Year of Issue _____	Issuing Institution _____	
Indicate the grade(s) or class(s) you're taking: _____						

Teacher #		Teacher's Position No:		National Identity Number:		
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 <input type="checkbox"/> Training (yet to graduate)	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"/> Elementary teaching Certificate <input type="checkbox"/> Gr.12 Certificate <input type="checkbox"/> Gr.10 Certificate <input type="checkbox"/> Other (<i>Specify</i>) _____			Certificate Number _____	Year of Issue _____	Issuing Institution _____	
Indicate the grade(s) or class(s) you're taking: _____						

SECTION 5:

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 #		Teacher's Position No:		National Identity Number:		
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 <input type="checkbox"/> Training (yet to graduate)	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"/> Elementary teaching Certificate <input type="checkbox"/> Gr.12 Certificate <input type="checkbox"/> Gr.10 Certificate <input type="checkbox"/> Other (<i>Specify</i>) _____				Certificate Number _____	Year of Issue _____	Issuing Institution _____
Indicate the grade(s) or class(s) you're taking:						

Teacher #		Teacher's Position No:		National Identity Number:		
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 <input type="checkbox"/> Training (yet to graduate)	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"/> Elementary teaching Certificate <input type="checkbox"/> Gr.12 Certificate <input type="checkbox"/> Gr.10 Certificate <input type="checkbox"/> Other (<i>Specify</i>) _____				Certificate Number _____	Year of Issue _____	Issuing Institution _____
Indicate the grade(s) or class(s) you're taking:						

- 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 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