



SPES Form 8

DEPARTMENT OF LABOR AND EMPLOYMENT
Regional Office No. _____
PUBLIC EMPLOYMENT SERVICE OFFICE

SPECIAL PROGRAM FOR EMPLOYMENT OF STUDENTS (SPES)
(RA 7323, as amended by RA 9547)



QUARTERLY WORK AND FINANCIAL REPORT

Number of Beneficiaries			BUDGET				Amount and Source/s of Funds			Status of 40% Payment of Salary & Amount		Remarks
(1)			(2)				(3)			(4)		(5)
Target	Accomplishment	Accomplishment Rate	Allocated	Utilized	Utilization Rate	Balance	GAA	BUB	Other Sources	Claimed	Unclaimed	(Kindly indicate if portion of SPES Budget is being realigned and the purpose for realignment)

- Notes:**
1. This form shall be accomplished by the Regional Office in Excel Format and shall be submitted to the Bureau of Local Employment via email at SPES.BLE.DOLE@gmail.com and od_ble@yahoo.com on or before 10th of the month after the reference quarter.
 2. Separate the number of beneficiaries per fund source.
 3. In column 4, state the status of payment of the 40% salary whether claimed or unclaimed and indicate the amount involved.

Prepared by:

Name, Designation & Signature

Date

Approved by:

Regional Director