



**TOURISM
INFRASTRUCTURE AND
ENTERPRISE
ZONE
AUTHORITY**

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MEMORANDUM

FOR : The Assistant Chief Operating Officers and Department Managers

Cc : The Head Technical Assistant, OCOO

FROM : The Manager, Corporate Planning Department

SUBJECT : Performance Commitment and Reports

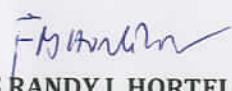
DATE : 12 August 2020

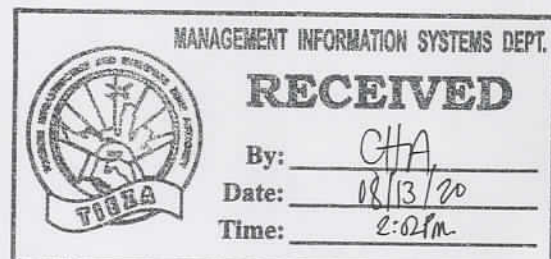
May we kindly request submission of the following documents relative to the above subject:

Performance Report	Date of Submission
A. 2020 Sectoral/Departmental Balanced Scorecard (BSC) with Readjusted Targets, as maybe necessary, in view of the effects of the COVID-19 pandemic and as a result of the TIEZA-GCG online meeting on 19 August 2020.	On or before 24 August 2020
B. 2 nd Semester 2020 OPCR with Rating Matrices	On or before 3 September 2020
C. 1 st Semester 2020 Office Performance Commitment Review (OPCR) with Rating and Supporting Documents	On or before 10 September 2020

For item A, the soft copy, in excel file with e-signatures of the approving authority, may be emailed through corplan@tieza.gov.ph. The excel file, as attached, consists of entries found in the *Enhanced Automated Monitoring and Evaluation Tool (AMET)*.

Thank you.


FRANCIS RANDY J. HORTELANO



TOURISM INFRASTRUCTURE AND ENTERPRISE ZONE AUTHORITY
(DEPARTMENT)
2020 BALANCED SCORECARD

PERSPECTIVE	STRATEGIC OBJECTIVE (SO)	Measure						Data Source	2019	2020	Quarterly Targets			
		Measure (M)	Measure Name	Operational Definition	Formula	Weight	Data Provider, if applicable				Q1	Q2	Q3	Q4
CUSTOMERS/ STAKEHOLDERS														
FINANCIAL														
			Budget Utilization Rate*	Measure of the extent to which the actual approved budget increased by supplemental or realigned budget of the Department is utilized	(Actual funds used/DBM approved- budget + supplemental or realigned budget) x 100%	5%				90%				
INTERNAL PROCESS														
LEARNING AND GROWTH														
			Personnel with competency enhancement needs sent to Competency-based training (HR Program)*	Competency-based training attended by personnel with competency enhancement needs	No. of employees who attended the training / Total No. of identified employees with competency enhancement needs X 100%	10%								
						100%								

Submitted by:

Department Manager

Date:

Approved by:

Assistant Chief Operating Officer

Date: