

0.a. Goal

[illegible]

0.b. Target

[illegible]

0.c. Indicator

[illegible]

0.d. Series

[illegible]

0.e. Metadata update

□ □ □ □ □ □ □ □ □ □ □ □ □ □ [□ □]

0.f. Related indicators

[] 0.0.0, 0.0.0, 0.0.0, 0, 0, 0, 0, 0.b.0 []

1.a. Organisation

[illegible]

1.b. Contact person(s)

□ □ □ □ □ □ □ □ □ □ [□ □]

1.c. Contact organisation unit

[illegible]

1.d. Contact person function

□ □ □ □ □ □ □ □ □ □ □ □ □ □ [□ □]

1.e. Contact phone

[] [] [] [] [] / [] [] [] [] [] []

1.f. Contact mail

1.g. Contact email

kimnettt@gmail.com []

2.a. Definition and concepts

[illegible]

2.b. Unit of measure

□□□□□ (%)

3.a. Data sources

(MEF) (MEYS)

3.b. Data collection method

The data sources listed in Table 1 are used to construct the variables in the model. The data are collected from various sources, including the Ministry of Education and Science (MEYS), the Ministry of Health, and the Ministry of Labour and Social Security. The data are collected on a regular basis and are used to calculate the variables in the model.

3.c. Data collection calendar

The data collection calendar is shown in Table 2.

3.d. Data release calendar

The data release calendar is shown in Table 3.

3.e. Data providers

The data providers are listed in Table 4.

3.f. Data compilers

The data compilers are listed in Table 5.

3.g. Institutional mandate

The institutional mandate is shown in Table 6. The mandate is to collect, process, and disseminate data on the health and education sectors. The mandate is given by the Ministry of Health and the Ministry of Education and Science. The mandate is to ensure that the data are accurate, reliable, and up-to-date. The mandate is to ensure that the data are accessible to the public and to the government. The mandate is to ensure that the data are used for the purpose of improving the health and education sectors.

4.a. Rationale

The rationale for the data collection is to provide information on the health and education sectors. The data are used to monitor the performance of the sectors and to identify areas for improvement. The data are used to inform policy-making and to evaluate the impact of interventions. The data are used to provide information to the public and to the government.

4.b. Comment and limitations

The data are subject to several limitations. The data are only available for the years 2010-2014. The data are only available for the health and education sectors. The data are only available for the public and the government. The data are only available for the purpose of improving the health and education sectors.

4.c. Method of computation

[illegible]
$$= \frac{1}{n} \sum_{i=1}^n \left(\frac{\partial L(\theta)}{\partial \theta} \right)_{\theta=\theta_i}$$
$$= \frac{1}{n} \sum_{i=1}^n \left(\frac{\partial L(\theta)}{\partial \theta} \right)_{\theta=\theta_i} \quad n \text{ samples}$$
[illegible]

4.d. Validation

[illegible]

4.i. Quality management

[illegible]

4.j. Quality assurance

00
 00
 0000000000000000000000 0.0 000
 0000000000000000 UNDP 000 UNICEF 0000000000000000000000000000000000

5. Data availability and disaggregation

[illegible]