

Republic of the Philippines

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Research and Development Division

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Page 1 of 1

MONTHLY ACCOMPLISHMENT REPORT FORM (Same as Quarterly Report except the duration)

WHY WE NEED YOUR DATA (R.A. 10173): The Division needs your personal data below to provide verifiable evidence in support of this endeavor and that you participated therein. We will include your data in our printed and electronic reports that we will send through secured channels. By signing herein, we will continuously keep your data and under lock and key, and will limit their use to authorized staff. If you do not agree, please inform us and we will permanently destroy your data after we have sent our reports. Project/Study Title : _____ Researcher/s Campus/College : _____ Duration of the Study: Month Covered: _____ Objectives/ Period of **Solutions** Activities Resources Accomplished/ **Problems Targets** implementation Not accomplished Encountered Prepared by: Noted: Approved: **[SIGNATURE OVER PRINTED NAME]** [SIGNATURE OVER PRINTED NAME] [SIGNATURE OVER PRINTED NAME] Program/Project/Study Leader RCM/ CRDH **R&D** Director