

**PHILIPPINE SCIENCE HIGH SCHOOL SYSTEM  
CAMPUS: \_\_\_\_\_**

**ACTIVITY REPORT FORM**

AR No.: \_\_\_\_\_  
(EC/CC-YYYY-NNN)

TITLE OF ACTIVITY:

DATE OF ACTIVITY:

HIGHLIGHTS OF THE ACTIVITY:

SPECIFIC ACCOMPLISHMENT:

RECOMMENDATIONS:

Prepared by:

Noted by:

\_\_\_\_\_  
Organizer  
Date:

\_\_\_\_\_  
Adviser/Sponsor/Coordinator  
Date:

Submitted to:

\_\_\_\_\_  
DSA Chief  
Date: