



DEPARTMENT OF EDUCATION 2026 NATIONAL SCHOOL CENSUS VOCATIONAL CENTRE

The National Department of Education (NDoE) uses an efficient method for gathering data from all schools in the country. Once a year forms are distributed and collected from all schools during School Census Week. This data will be used to chart the progress of the National Education Plan and assist provinces for future education services.

Managers and Manageresses are being asked to fill out these forms accurately and honestly as possible. The **Reference Point** of data collection is during the census week (**9th-13th March 2026**). Hold one copy for your school's record, send one copy to the District Education Officer (DEO) and two copies to the Provincial Education Advisor (PEA). The PEA will verify and send one form to the Statistics Branch of NDoE as the official record for your school.

The Department wants to thank you in advance for taking time to carefully fill out this form and for assisting us in gathering more accurate and useful data on schools in our country.

SECTION 1: SCHOOL DETAILS

This first section covers the basic contact details about your school.

1. Vocational Name _____ 2. Vocational Code _____

3. Province Name _____ 4. Province Code _____

5. District Name _____ 6. District Code _____

7. LLG Name _____ 8. Ward Name _____

9. What is the centre status? *(Tick ✓ the appropriate box)* Operating Suspended Closed

10. Is your centre under National Education System (NES) or a Private centre? *(If you tick ✓ the NES box then answer question 11)*

National Education System (NES) Permitted Private

11. Is your centre registered under the National Education System (NES)? *(Tick ✓ the appropriate box)*

Yes No

12. What agency does your centre belong to? *(Tick ✓ the appropriate box)*

Government Catholic Evangelical Alliance United Church Lutheran Church
 Anglican Seventh Day Adventist Others: _____

13. School sector: *(Tick ✓ the appropriate box)*

Vocational Centre Technical High School

14. What is the level of your centre? *(Tick ✓ the appropriate box)*

2 3 4 5 6 7 Other: _____

15. Where is your centre located? *(Tick ✓ the appropriate box)* Urban Rural

16. Is your centre a: *(Tick ✓ the appropriate box)*

Day school only? Boarding only? Mixed? (Day and Boarding)

17. Vocational Postal Address: _____

18. Vocational Phone No: _____ 19. Vocational Fax No: _____

20. Vocational Email Address: _____

SECTION 2:

SCHOOL FINANCES

This section covers the money your school received from various sources during 2025. Please be accurate as possible. If your school received no money from a particular source, please indicate with a dash (-) in the box below.

21. How much did your school actually receive from other sources in 2025?

(Only indicate the income your school received last year and not what it should have received. This should include any money received for ancillary staff salaries, school materials, school buildings, etc.)

Source of School Funds

Government Tuition Fee Subsidies:

Provincial Government Subsidies:

Local-level Government:

School fund raising activities:

Parents donations:

Politicians: —

Project Fees:

Fees collection:

Overseas Donors: -

Other:

Sub-total: _____

Amount (in Kina)

SECTION 3:

STUDENT ENROLMENT / CLASSES / GRADUATES

This section covers information about the number of programmes and students in your school. Most of this information will be taken from the school attendance books. Questions 23 - 27 ask you to include all students still on the school roll after **13th March 2026**. Only question 22 asks you about last year's graduated students.

22. Please indicate the number of students in 2025 who completed their course and attained certificates from your centre by course category.

CATEGORY	ATTAINED CERTIFICATE	MALE	FEMALE	TOTAL
CONVENTIONAL/TRADE (Year 2)	TRADE CERTIFICATE			
TECHNICAL HIGH SCHOOL	ACADEMIC CERTIFICATE			
	TRADE CERTIFICATE			
PETT	PETT CERTIFICATE			
NATIONAL CERTIFICATE 1	NATIONAL CERTIFICATE 1			
NATIONAL CERTIFICATE 2	NATIONAL CERTIFICATE 2			
SHORT COURSES	CERTIFICATE Attained			
OTHER NON-TRADES	CERTIFICATE Attained			
	TOTAL			

23. Indicate the number of students currently boarding at your centre by gender in each course category.

(Write the number of boarding students only if you ticked "mixed" or "boarding only" in question 16 of section 1)

24. How many classes does your centre have for each course category?

25. Indicate the total number of students enrolled in each program, by category and gender. Indicate only relevant programs offered at your centre. (Include all students still enrolled after 13th March 2026.)

26. Indicate the total number of students enrolled in each category, by year of birth and gender. If you have students born in years not indicated, then fill in those years in the blank spaces provided below 2000.

(Include all students still enrolled after 13th March 2026)

Year of Birth	CONVENTIONAL TRADE				THS (DUAL)				PETT		NC 1		NC 2		OTHERS		TOTAL		
	Year 1		Year 2		Grade 9		Grade 10		Year 1										
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	T
2012																			
2011																			
2010																			
2009																			
2008																			
2007																			
2006																			
2005																			
2004																			
2003																			
2002																			
2001																			
2000																			
TOTAL																			

(These totals should be the same as the total number of students in each grade from question 25)

27. Please indicate the number of students with special needs or disabilities this year at your centre by category and gender.

* (SERC) stands for Special Education Resource Center.

Category	CONVENTIONAL-TRADE				THS (DUAL)				PETT		NC 1		NC 2		Others		Total		
	Year 1		Year 2		Grade 9		Grade 10		Year 1										
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	T
Registered with SERC																			
Not registered with SERC																			
TOTAL																			

(These totals should not exceed the total number of students in each grade from question 25 & 26.)

SECTION 4:**SCHOOL INFRASTRUCTURE DETAILS**

This section covers the existing school infrastructure and how well board of management is managing each school.

28. Indicate the number of classrooms, storerooms, offices, staff-rooms, staff houses and other buildings in the school.

- | | | | | | |
|-------------------------------------|--|--|----------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> Classrooms | <input type="checkbox"/> Staff houses | <input type="checkbox"/> Library | <input type="checkbox"/> Offices | <input type="checkbox"/> Computer Lab | <input type="checkbox"/> Staff-rooms |
| <input type="checkbox"/> Workshops | <input type="checkbox"/> Practical Skills Building | <input type="checkbox"/> Home Economics Building | <input type="checkbox"/> Others | | |

29. How many classrooms of each type and condition are there? *(Write the number in the boxes provided)*

Building Types	Permanent	Semi-Permanent	Bush Material
Total Classrooms			
How many classrooms require minor repair			
How many classrooms require major repair			

30. What is the number of toilet type(s) the students use?

Toilet Types	Permanent		Semi-Permanent		Bush Material	
	M	F	M	F	M	F
Septic Toilets (Flush/Pour)						
Shore Drop (Solwara)						
Pit Toilets:						
<i>Pit with Cover</i>						
<i>Pit without Cover</i>						
<i>Composting Toilet</i>						
*None						
Total Toilets						

* If school has no toilets, please circle none and leave blank.

31. How many usable toilets does your school have? **Only fill in if your school toilets meet the definition of *usable.**

* Usable means toilets main doors are unlocked, the toilet is not broken, the toilet hole is not blocked, and water is available for flush/pour toilets, and there are closable doors that lock from the inside and no large gaps in the structure at the time of the questionnaire or survey.

Total Toilets	Male Toilets	Female Toilets	*Common (Shared) Toilets

* Common (Shared) toilets means when a school does not have separate toilets for male and female students and all students use the same toilet(s).

32. Where does the school get most of its drinking water from? *(Tick one)*

- | | | | |
|---|---|--------------------------------------|---|
| <input type="checkbox"/> Town Supply | <input type="checkbox"/> Tank Water | <input type="checkbox"/> Piped Water | <input type="checkbox"/> Bringing water from home |
| <input type="checkbox"/> Well/Spring <small>[protected/unprotected]</small>
(Circle one) | <input type="checkbox"/> Lake, Creek, River, Stream
(Circle one) | <input type="checkbox"/> None | |

33. Is drinking water from the above main source currently available at the school? Yes No

34. Does the school have hand washing facilities with soap and water available? *(Tick one)*

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> Yes, with both soap and water | <input type="checkbox"/> With water only | <input type="checkbox"/> With soap only | <input type="checkbox"/> No facilities with soap and water |
|--|--|---|--|

35. What type of power supply does the school use? *(Tick one)*

- | | | | | |
|------------------------------------|--------------------------------|------------------------------------|--------------------------------|--|
| <input type="checkbox"/> PNG Power | <input type="checkbox"/> Solar | <input type="checkbox"/> Generator | <input type="checkbox"/> Hydro | <input type="checkbox"/> Others: _____ |
|------------------------------------|--------------------------------|------------------------------------|--------------------------------|--|

(Specify)

SECTION 5:**ADDITIONAL INFORMATION**

36. Did your school head receive training on finance and management in the past 12 months? *(Tick one)*

Yes No

37. Has your school been visited and observed in the past 12 months? *(Tick one)*

Yes No

SECTION 6:**TEACHER INFORMATION**

This section provides key information for each teacher in your school. Fill out as much information as you can. You have to go to each teacher to get this information before completing the form. Also indicate each teacher's position.

The table below is to identify the number of teachers posted in your school with their highest qualification by gender.

No	Qualification	Male	Female
1	Diploma in Vocational Education Teaching (DIVET)		
2	Trade Qualification		
3	Degree (Specify)		
4	Others (Specify)		
Total			

Please indicate the number of teachers in the table below

2025 Number of Teachers		
Male	Female	Total

Please fill in the tables below for all teachers that are **registered and retained, upgraded qualification** and the **teacher is new or transferred in**.

Teacher #	Position No:		National Identity Number:	
Surname	First Name	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth ____ / ____ / ____ (Day) (Month) (Year)	Nationality <input type="checkbox"/> PNG Citizen <input type="checkbox"/> Non PNG Citizen
TSC File Number	Teacher Registration Type (Tick <input type="checkbox"/> one) <input type="checkbox"/> Full <input type="checkbox"/> Provisional	Teacher Registration Number	Type of Employee (Tick <input type="checkbox"/> all that apply) <input type="checkbox"/> TSC Employee <input type="checkbox"/> Non TSC Employee <input type="checkbox"/> TSC Contract <input type="checkbox"/> TSC Volunteer	What year did this teacher start teaching? ____ yr
What is the highest teaching qualification obtained? <i>(Tick <input type="checkbox"/> the highest only)</i>		Certificate Number	Year of Issue	Issuing Institute
<input type="checkbox"/> Diploma in Vocational Education Teaching (DIVET) <input type="checkbox"/> Trade Qualification <input type="checkbox"/> Degree (Specify)				
What trade does the teacher specialise in?		What level of trade? <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	Year teacher sat the trade test	Certificate Number
What are the current subjects and grades/year is this teacher currently teaching?		Subjects	Grades/Year	

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_____ _____ _____ _____ _____		_____ _____ _____ _____ _____		

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_____ _____ _____ _____ _____		_____ _____ _____ _____ _____		

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			_____	_____	_____
			_____	_____	_____
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_____			_____		
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____		____		
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<input type="checkbox"/> Diploma in Vocational Education Teaching (DIVET) <input type="checkbox"/> Trade Qualification <input type="checkbox"/> Degree (Specify)					
What trade does the teacher specialise in?		What level of trade? <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	Year teacher sat the trade test		Certificate Number
What are the current subjects and grades/year is this teacher currently teaching?					
Subjects		Grades/Year			

Teacher #	Position No:		National Identity Number:		
Surname	First Name	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth ____ / ____ / ____ (Day) (Month) (Year)	Nationality <input type="checkbox"/> PNG Citizen <input type="checkbox"/> Non PNG Citizen	
TSC File Number	Teacher Registration Type (Tick <i>✓</i> one) <input type="checkbox"/> Full <input type="checkbox"/> Provisional	Teacher Registration Number	Type of Employee (Tick <i>✓</i> all that apply) <input type="checkbox"/> TSC Employee <input type="checkbox"/> Non TSC Employee <input type="checkbox"/> TSC Contract <input type="checkbox"/> TSC Volunteer		What year did this teacher start teaching? ____ yr
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Subjects		Grades/Year			

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This section provides key information for each teacher in your school. Fill out as much information as you can. You have to go to each teacher to get this information before completing the form. Also indicate each teacher's position.

Teacher #	Position No:		National Identity Number:	
Surname	First Name	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth ____ / ____ / ____ (Day) (Month) (Year)	Nationality <input type="checkbox"/> PNG Citizen <input type="checkbox"/> Non PNG Citizen
TSC File Number	Teacher Registration Type (Tick <i>✓</i> one) <input type="checkbox"/> Full <input type="checkbox"/> Provisional	Teacher Registration Number	Type of Employee (Tick <i>✓</i> all that apply) <input type="checkbox"/> TSC Employee <input type="checkbox"/> Non TSC Employee <input type="checkbox"/> TSC Contract <input type="checkbox"/> TSC Volunteer	What year did this teacher start teaching? ____ yr
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Subjects		Grades/Year		

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Surname	First Name	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth ____ / ____ / ____ (Day) (Month) (Year)	Nationality <input type="checkbox"/> PNG Citizen <input type="checkbox"/> Non PNG Citizen
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What are the current subjects and grades/year is this teacher currently teaching?				
Subjects		Grades/Year		

- Person filling out this National School Census Form needs to sign off the census forms as being accurate and completed on the spaces provided below;

Name: _____ Signature: _____ Date filled out: _____

- Senior Standards / Standards Officers (SSO/SO) needs to validate and verify that data is complete, correct and accurate.

Name: _____ Signature: _____ Date: _____

- Provincial Education Office needs to certify the form, and stamp it before sending the form to DoE Headquarters.

Standards Officer Stamp

Provincial Education Advisor Stamp