

### Department of Education

#### REGION XI SCHOOLS DIVISION OF DAVAO DEL NORTE

#### Office of the Schools Division Superintendent

#### **DIVISION MEMORANDUM**

SGOD-23-394

To:

Assistant Schools Division Superintendent

Chief Education Supervisor, CID Chief Education Supervisor, SGOD Public Schools District Supervisor

Subject:

PARTICIPATION TO THE PROVINCIAL ANTI-DRUG ABUSE COUNCIL

VARIOUS ACTIVITIES DURING THE DRUG ABUSE PREVENTION

AND CONTROL WEEK CELEBRATION

Date:

November 9, 2023

- 1. This has reference to the Provicial Anti- Drug Abuse Council, Resolution No. 1 Series of 202, this Office will conduct the said activity on **November 10, 2023**, at Gaisano Mall of Tagum and on **November 16, 2023**, at Heroben Hotel, Tagum City
- 2. The following are the activities, to wit:

ACTIVITY	DATE / VENUE
QUIZ BEE and POSTER MAKING CONTEST	November 10, 2023 – GMALL Tagum
CULMINATION and AWARDING	November 16, 2023 – Heroben Hotel

- 3. Moreover, as per compliance with DepEd Order No. 9, s. 2005 on the "No Disruption of Classes Policy", school heads shall ensure that the classes are taken care of in accordance with the "No Disruption of Classes Policy" of the concerned Advisers during their attendance in the activity, please see **Annex A** for the list of the official participants and **Annex B** for the parents' consent.
- 4. Travelling and other incidental expenses of the participants shall be charged against the Division, School MOOE funds, PTA Funds, and other existing funds and subject to the usual accounting and auditing rules and regulations.
- 5. In accordance with Division Memo. No. 818, s. 2021. Everyone is encouraged to continuously support and value Equal Opportunities Principle (EOP) within the Department.
- 6. For information and widest dissemination to all concerned.

#### REYNALDO B. MELLORIDA, CESO V

Schools Division Superintendent

Page **1** of **4** 



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# Department of Education

## SCHOOLS DIVISION OF DAVAO DEL NORTE

#### Office of the Schools Division Superintendent

For the Schools Division Superintendent;

REBECCA C. SAGOT, CESO VI

Assistant School Division Superintendent

SGOD/eaa





## Department of Education

#### REGION XI SCHOOLS DIVISION OF DAVAO DEL NORTE

#### Office of the Schools Division Superintendent

#### ANNEX A

#### **DIVISION OFFICE AND SCHOOL PARTICIPANTS**

NAME	DESIGNATION	OFFICE/SCHOOL			
Alrene Calotes	Nurse II - NDEP Coordinator	Division Office			
Elvin A. Anajao	PDO I	Division Office			
Jillian April A. Casal	PDO I	Division Office			
Armi Mulit	Nurse II	Division Office			
Harold T. Lebria	BKD Coordinator	Sto Tomas NHS			

#### PARTICIPANTS FOR THE QUIZ BEE

NAME OF PARTICIPANTS	GRADE	NAME OF COACH	SCHOOL	DISTRICT
Bea I Ramos	XII	Jocelyn P. Diones	Asuncion NHS	Asuncion District
Terry-Ledd M. Hilario	XII	Jhonry Morado	Dujali NHS	B.Dujali District
John Lowilyn S. Caballero	XII	Elezar H. Mandanao	Carmen NHS	Carmen District
Czara Nina S. Navarro	XII	Jerry P. Alquizar	Kapalong NHS	Kapalong East District
Mary Queen R. Cabanilla	XI	Gladys N. Chatto	New Corella NHS	New Corella District
Evanjelyn Galos	XII	Editha Demerin	Sawata NHS	San Isidro District
Sandy Gee Pascual	XII	Analiza T. Campilanan	Tulalian NHS	Sto. Tomas West
Joshua Monterde	XII	Karen Angteg	Sto. Nino NHS	Talaingod District

#### PARTICIPANTS FOR THE POSTER MAKING CONTEST

NAME OF PARTICIPANTS	GRADE	NAME OF COACH	SCHOOL	DISTRICT
Kristina Alexa F. Imbang	VII	Darwin A. Anit	Asuncion NHS	Asuncion District
Clark Jake T. Picar	VII	Judith B. Agreda	Dujali NHS	B.Dujali District
Katrina P. Carriedo	IX	Leonard Mike M. Blancaflor	Carmen NHS	Carmen District
Ahlxeuz Prince Nixzel Jaya Nicolas	VIII	Donald James L. Cordero	Kapalong NHS	Kapalong East District
Ayisha T. Mesolis	VII	Maria Grace E. Abdulgani	New Corella NHS	New Corella District
Ana Isabel C. Llevado	IX	Rowella Joy Orioque	Linao NHS	San Isidro District
Gillard P. Suazo	VIII	Sol Pelicano	Marsman NHS	Sto. Tomas West
Princess Kyed Gonzales	X	Noel Owen Miranda	Sto. Nino NHS	Talaingod District

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**ANNEX B** 

#### **PARENT'S CONSENT**

I,	, parent/guardian of								
(name of pare		t)							
a student of			do	hereby	allow/	give	my	permission	for
(name of	school)								
the attendance of my so	n/daughter to the:								
Name of the activity:					na				
Venue/Location:									
Date:									
I have considered the lea activity with understanding						_			
Parent/Guardian's Signat	ure Over Printed Na	me					Da		