



Republic of the Philippines
Department of Education
Region IV-A CALABARZON
Province of Quezon
CITY SCHOOLS DIVISION OF TAYABAS
Luis Palad Comp., Brgy. Ipilan, Tayabas City



DEPED-TAY-DM-SGOD-18-337

TO : **CHIEFS, CID AND SGOD
EDUCATION PROGRAM SUPERVISORS
HEADS, PUBLIC ELEMENTARY AND SECONDARY SCHOOLS
ALL OTHER CONCERNS**

FOR : **CATHERINE P. TALAVERA, CESO VI**
Schools Division Superintendent

BY : **CONRADO C. GABARDA**
Administrative Officer V

SUBJECT : **WORLD MENTAL HEALTH WEEK CELEBRATION**

DATE : **OCTOBER 5, 2018**

The Department of Education (Dep Ed) shall observe the 2018 National Mental Health Week, pursuant to Presidential Proclamation No. 52.s1994.entitled declaring the **Second Week of October of Every Year as National Mental Health Week.**

Relative to the Dep Ed Memorandum No. 148,s 2018, the School Division of Tayabas will be having a series of advocacy on Mental Health Awareness to the learners, parents and teachers.

In this regard, we would like to have your support in implementing this yearly campaign. There will be a forum with the **Theme: "Young People and Mental Health in a Changing World" to be attended by the School Health and Nutrition Program Coordinators on October 11,2018,1:00pm at Mariposa Hall, Brgy Camaysa , Tayabas City.**

Attached herewith is the list of Schools Health and Nutrition Program Coordinators for your information and guidance.

Immediate disseminations of this memorandum is highly desired.

SGOD/2018 World Mental Health Week Celebration

DM 337-2018

We, the personnel of the SDO Tayabas City commit to continuously SOAR HIGH.

S-atisfy customers' needs O-ptimize the use of ICT enabled system A-dvocate in the promotion of healthy schools R-ender timely and responsive services
H-elp create a child-friendly environment I-integrate QMS in all SDO activities G-overn gender sensitive workplace H-all quality standards

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Tayabas City








SCHOOL HEALTH AND NUTRITION COORDINATORS

<u>SCHOOL</u>	<u>NUMBER of COORDINATORS To Attend</u>
1. Alsam Elementary School	1
2. Bukal Elementary School	1
3. Busal	1
4. Dapdap Integrated School	2
5. Domoit Elementary School	1
6. East Palale Elementary School	1
7. Froilan E. Lopez Elementary School	1
8. Gibanga Elementary School	1
9. Ilasan Elementary School	1
10. Ipilan-Alitao Elementary School	1
11. Kalumpang Elementary School	1
12. Katigan-Alupay Elementary School	1
13. Lacawan Elementary School	1
14. Lalo Elementary School	1
15. Lawigue Elementary School	1
16. Malaoa-Calantas Elementary School	1
17. Masin Elementary School	1
18. Mate Elementary School	1
19. North Palale Elementary School	1
20. Pandakaki Elementary School	1
21. Poto Elementary School	1
22. South Palale Elementary School	1
23. Tayabas East Central School I	2
24. Tayabas East Central School II	1
25. Tayabas East Central School III	1
26. Tayabas West Central School I	2
27. Tayabas West Central School II	1
28. Tayabas West Central School III	1
29. Tayabas West Central School IV	1
30. Valencia Elementary School	1
31. Wakas Elementary School	1
32. West Palale Elementary School	1
33. West Palale National High School	1
34. Rosario Quesada Memorial High School	1
35. Luis Palad Integrated High School	2
36. Stand Alone Senior High School	1



CITY SCHOOLS DIVISION OF TAYABAS	Unique ID Code: DEPED-TAY-OM-ADMN-00F01	Page 1 of 2
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Reference No.: 1014-2018		Date: 8 Oct 2018
NAME OF OFFICIAL/EMPLOYEE		DESIGNATION & STATION
All 36 School Health Nutrition Coordinators		
Purpose: To attend World Mental Health Week Celebration		
Destination: Mariposa Hall, Brgy. Camaysa, Tayabas City		
Period of Travel: FROM 11 Oct 2018 TO 11 Oct 2018		
Please check: Travel is on: <input type="checkbox"/> Official Time <input checked="" type="checkbox"/> Official Business Source of Fund: <input type="checkbox"/> HRTD Fund (for official <input type="checkbox"/> LSB Fund business only) <input type="checkbox"/> MOOE <input checked="" type="checkbox"/> Others (Pls. Specify) <u>SCHOOL WTE</u>		Estimated Expenses Registration Fee Php _____ Transportation _____ Travel Allowance _____ On Travel Time only _____ Full Allowance _____ Total Estimated Php _____ Expenses
Means of Transportation: <input type="checkbox"/> Van Hire <input type="checkbox"/> Official Vehicle <input type="checkbox"/> PUV <input type="checkbox"/> Others _____		Noted : <div style="text-align: center;">  BENJAMIN A. MILLARES Administrative Officer V-Budget </div> <div style="text-align: center;">  AGNES M. LUZADAS Accountant III </div>
Requested by: <div style="text-align: center;">  ALELIE A. PADILLO NURSE II </div>		Recommending Approval: <div style="text-align: center;">  LUZVIMINDA SALUDARES EPS II </div>
<p style="text-align: center;">Approved:</p> <p style="text-align: center;">For:</p> <p style="text-align: center;">CATHERINE P. TALAVERA, CESO VI Schools Division Superintendent</p> <p style="text-align: center;">By:</p> <div style="text-align: center;">  CONRADO C. GABARDA Administrative Officer V Officer-of-the-Day </div>		
Remarks:		