

RELEASED

Date: 6/25/14 Time: 2:16 PM  
By: *aw Anabelle*



DEPARTMENT OF EDUCATION  
Region X- Northern Mindanao

**DIVISION OF MALAYBALAY CITY**

Corner Don Carlos and Guingona Sts., City of Malaybalay  
Telefax # 088-813-2894 or 221-4597, E-mail add: [dpdmlyblycity@yahoo.com](mailto:dpdmlyblycity@yahoo.com)  
Website: <http://depedmalaybalay.page4.me>



June 25, 2014

## DIVISION ADVISORY

TO: All Job Order Employees  
Thru: All Concerned Offices/District/School/Section Heads

1. Pursuant to the herein unnumbered memorandum dated June 23, 2014 of the City Government of Malaybalay, all job order are hereby directed to submit the Mandatory Drug Testing on June 26, 2014, 8:00 to 12:00 a.m. at X-El Drug Testing Center in front of LTO.
2. As stated, failure or refusal to submit to the above scheduled date sans any valid reason shall be sufficient ground for non-renewal. Further, you are directed to present your City Government Identification (Green ID) and fill-up drug testing forms (DT-001, DT-002A, DT-002B and DT-002C) prior to your screening test to avoid delays.
3. For information and guidance.

FOR THE SCHOOLS DIVISION SUPERINTENDENT:

**RALPH T. QUIROG**

EPS/Chief Education Supervisor-Designate/  
Officer in Charge

Ecl.:  
As stated

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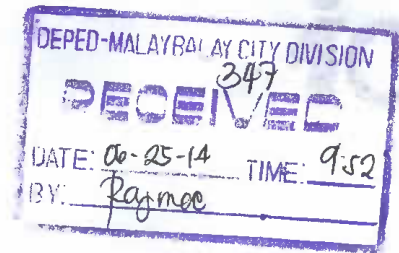
**TO BE POSTED IN THE WEBSITE**



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Province of Bukidnon  
**CITY OF MALAYBALAY**  
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## OFFICE OF THE CITY MAYOR

June 23, 2014

### MEMORANDUM

To: All job order assigned at the *for*

Subject: **MANDATORY DRUG TESTING**

Pursuant to Administrative Order No. 14, Series of 2012, all job order of the city government assigned at the above cited offices are hereby directed to submit to Mandatory Drug Testing on June 26, 2014, 8:00 to 12:00 a.m. at X-EI Drug Testing Center in front of LTO.

Failure or refusal to submit to the above scheduled date sans any valid reason shall be sufficient ground for non-renewal. Further, you are directed to present your City Government Identification (Green ID) and fill-up drug testing forms (DT-001, DT-002A, DT-002B and DT-002C) prior to your screening test to avoid delays.

For strict compliance.

**ATTY. ROLAND F. DETICIO**  
Acting City Mayor



Proof of Receipt:

(Signature over printed name)

Date: \_\_\_\_\_ Time: \_\_\_\_\_