## APPENDIX - XIII

## PROFORMA FOR SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE

No.	Dated: 9.12.
It is certified that an inspection	team headed by . M. RAMESH, BLOCK HEALTH SUPERVISE
(Name of Officers with designation) from PUBLIC HEALTH DEPT. UTHANGARAY BLOCK	
(Name of Department/ Office) i	nspected the MS. ADHIYAYAN PUBLIC SCHOOL, MALLIGM
(Name & Address of the school	on (date of inspection) and
found that the Ms. ADMYAYA	N PUBLIC SCHOOL (Name of school)
has safe drinking water facilities	s for the students and members of staff of the institution and
is maintaining the hygienic sanitation condition in the school building & the campus as per	
norms prescribed by the Central	/ State/ U.T. Govt.
The above is valid for a period of	OF ONE YEAR DNLY FROM THE DATE OF ISSUE
	Signature with Seal:  BLOCK HEALTH SUPERVISOR  On the Seal of the
	Name:
¥ 1	Designation: BLOCK HEALTH SUPERVISOR
	Name & Address of the Office / Department :
To	
M/S. ADHIYAMAN PUBLIC SCHOOL	
MALLIGIAJ NAGAR, UTHANGJARAJ (TIC), KRISANAGIR, (DT), 635207	
(Name & Address of the Institution)	

\* The filled up certificate should be either in Hindi or English. If it is issued in vernacular language, translated notarized version in English be uploaded along with the original vernacular certificate as a single pdf.