PROFORMA FOR SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE

No.		Dated 20 03 125
It is certified that an inspection team	headed by	Henrat Singly
(Name of Officers with designation) f		
(Name of Department/Office) inspec	ted theArcad	ian public School, Bagna, Mat
(Name & Address of the school) on .?	70/03/57 (date	e of inspection) and found that the
students and members of staff of	the institution and	l) has safe drinking water facilities for the dismaintaining the hygienic sanitation ms prescribed by the Central/State/U.T.
The above is valid for a period of?	20103126	
	Signature v	vith Seal:
	Name	. ०० मक्यिकत्साधीक्षक सामु.स्या.केन्द्र नीत्सीकी
	Designatio	***
	Name & Address	of the Office/ Department : Health
To,		Depaiment CHC Nauheel.
Arcedian public school		
Burna, marting		

(Name & Address of the Institution)

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