PROFORMA REGARDING SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE

No. ..... Date: 23/11/26

It is certified that an inspection team headed by ....Dr....Rajesh...Kumar.....(PRABHARI CHIKITSA ADHIKARI) (Name of Officers with designation) from **P.H.C. MUNGRA BADSHAHPUR** (Name of Department / Office) inspected the **CITY PUBLIC SCHOOL - KATRA, MUNGRA BADSHAHPUR, JAUNPUR** (Name & Address of the School) on ....23/11/26..... and found that the **CITY PUBLIC SCHOOL** (Name of school) has safe drinking water facilities 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 the norms prescribed by the Central/State/U.T. Govt.

The above is valid for a period of ....23/11/27.....

Signature with Seal :

.....

Name: .....

Designation: Prabhari Chikitsa Adhikari

प्रभारी चिकित्साधिकारी
प्रा0स्वा0 केन्द्र मुंगरा बादशाहपुर
जौनपुर

To,

The Manager,

CITY PUBLIC SCHOOL,

KATRA, MUNGRA BADSHAHPUR, JAUNPUR