

75  
08/05/2023

PROFORMA FOR SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE

No.

Dated:

It is certified that an inspection team headed by ..... Dr. AMIT MALEK .....

(Name of Officers with designation) from ..... M.B.B.S .....

(Name of Department/ Office) inspected the ..... Medical officer SDH Tohana .....

(Name & Address of the school) on ..... St. Joseph's Int. school ..... (date of inspection) and found that the  
08/05/23  
..... ( 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 norms prescribed by the Central/ State/ U.T. Govt.

The above is valid for a period of ..... 07/5/2024 .....

water O.T. Test.  
Positive on  
Dated :- 08/05/2023  
Dr. AMIT MALEK

Signature with Seal: ..... Medical Officer .....

Name

..... Civil Hospital, Tohana .....

Designation

..... Medical officer .....

Name & Address of the Office / Department : .....

UP 92976

To

St. Joseph's International School

Bhuna Road, Tohana (125120)

(Name & Address of the Institution) School Code - 40271

\* 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.