PROFORMA FOR SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE

10. 215/2024		Dated: 1.07.20	ba4
t is certified that an inspection team headed	by M.I. CIRAJ,	HEALTH INSP	ECTOR
Name of Officers with designation) from	FHC KEEZHM	AD	
Name of Department/ Office) inspected the	SIVAGIRI VID	YANIKETAN	
Name & Address of the school) on	(Name of school) has	s safe drinking water	
acilities for the students and members of s			
anitation condition in the school building &	the campus as per norms pre	scribed by the Central/	
State/ U.T. Govt.			
he above is valid for a period of	YEARSignature with Seal:	De la	
	DA - 1	1. CIRAJ	4.00
	Name		2
	Designation : HEA	alth inspector	
PRINCIPAL,	Name & Address of the Office	ce / Department : REALTH INSPECTO F. H CENTRE KEEZHMADU	OB
SIVAGIRI VIDYANIKETAN			
Name & Address of the Institution)			

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

Medical Officer Incharge Family Health Centre Keezhmad Erumathala P.O., Aluva - 683 112