

PROFORMA REGARDING SAFE DRINKING WATER & SANITATION CERTIFICATENo. 1589Date: 27-1-2022

It is certified that an inspection team headed by Dr. Giridhari Lal
C.M.U. (Name of Officers
 with designation) from epce/ldh. (Name of
 Department/Office) inspected the SARASWATI PUBLIC SCHOOL,
SECTOR-7, JAWAHAR NAGAR, SRIGANGANAGAR (Name & Address of
 the School) on _____ and found that the SARASWATI
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 valid for a period of As per rule

Signature with Seal : DrName : Dr Giridhari LalDesignation : C.M.U.

मुख्य चिकित्सा एवं स्वास्थ्य अधिकारी
 श्रीगंगानगर (राज.)

To

SARASWATI PUBLIC SCHOOLSECTOR-7, JAWAHAR NAGAR,SRIGANGANAGAR (RAJ.)

(Name & Address of the Institution)

Principal
 Saraswati Public School

PROFORMA REGARDING HEALTH CERTIFICATE

No. 1589Date: 27-01-2022

It is certified that an inspection team headed by Dr. Giridhari Lal CMHO (Name of Officers with designation) from Health (Name of Department/Office) inspected the SARASWATI PUBLIC SCHOOL, SECTOR-7, JAWAHAR NAGAR, SRIGANGANAGAR (Name & Address of the School) on _____ and found that the SARASWATI PUBLIC SCHOOL (Name of school) has safe Health 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.

As per rule

The above valid for a period of _____.

Signature with Seal : [Signature]Name : [Signature]Designation : मुख्य चिकित्सा एवं स्वास्थ्य अधिकारी
श्रीगंगानगर (राज.)

To

SARASWATI PUBLIC SCHOOL
SECTOR-7, JAWAHAR NAGAR,
SRI GANGANAGAR (RAJ.)

(Name & Address of the Institution)

[Signature]
Principal
Saraswati Public School