

## PROFORMA FOR SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE

No.

Dated: 06/05/2023

It is certified that an inspection team headed by ..... Dr. Snehil Jain

(Name of Officers with designation) from ..... CHC Suwasra

(Name of Department/ Office) inspected the ..... Shree Sarawati Seminary Sr.Sec. School Suwasra

(Name & Address of the school) on ..... 05/05/2023 ..... (date of inspection) and found that the  
 Shree Saraswati Seminary Sr. Sec. School Suwasra ..... ( 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 ..... One Year

Signature with Seal: .....

Name ..... Dr. Snehil Jain

Designation ..... Medical Officer

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

CHC, Suwasra,  
 9893326660

To

..... Shree Saraswati Seminary  
 ..... Sr.Sec.School Suwasra

(Name &amp; Address of the Institution)

\* 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.

MANAGER  
 SHREE SARASWATI SEMINARY SUWASRA

PRINCIPAL  
 SHREE SARASWATI SEMINARY  
 (Sr Sec. School) SUWASRA