PROFORMA REGARDING SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE.

No	_			Dat	te: 26-0	5-22
It is certified	that	an	inspection	team	headed	by
Dr. Rajnesh Lun	lar					
CHC Suptt		(Name of Office	ers with	designation)	from
medical and	Heald	h D	epartme.	nt	(Nan	ne of
Department/Office) inspected the	AMOL C	CHAND	PUBLIC SCHOO	OL, G.T. F	ROAD, SIKAN	NDRA
RAO, HATHRAS (U.P.), 20421	5 on <u>2</u>	6-05	-22 and foun	d that the	e AMOL CH	IAND
PUBLIC SCHOOL has safe drink	ing water	facilities	s for the students	and mem	bers of staff	of the
institution and is maintaining the	e hygieni	c sanita	ntion condition in	the scho	ool building &	& the
campus as per the norms prescrib	ed by the	Centra	I/State/U.T Govt.			
The above valid for a perio	od of	mes	jear.			
						$\Lambda_{\mathbf{o}}$
					0 John	0
			Sign. with Seal		Still Street	STATE OF
			Name : _DR	Rayn	ech Jan	nav
			Designation : _	C-Se.	c Sup	tt

To

AMOL CHAND PUBLIC SCHOOL

G.T. ROAD, SIKANDRA RAO,

HATHRAS (U.P.), 204215