

Appendix-VIII

PROFORMA REGARDING SAFE DRINKING WATER AND SANITARY CONDITION


CERTIFICATE

No. 536

Date: 8/5/25

It is certified that an inspection team headed by _____ (Name of Officers with designation) from **Nagar Palika , Sadri** (Name of Department / Office) inspected the Adarsh Vidyalaya , **Ranakpur Road , Sadri** (Name of the school) on 8/5/25 and found that the Adarsh Vidyalaya , **Ranakpur Road , Sadri** (Name of the 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 is valid for a period of 8/5/26.

Signature with Seal : 

Name

: Sayank Palani

Designation

: IAO

अधिशायी अधिकारी
मनरपालिका, सादरी

To,

The Principal

Adarsh Vidyalaya

Ranakpur Road , Sadri

(Name & Address of the Institution)