APPENDIX-VIII

PERFORMA REGARDING SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE

No. —

Date 06-06-24

It is certified that an inspection team headed by Dr. MANAS CHAUHAN (MEDICAL OFFICER) (Name of Officers with designation) from CHS, DHAMPUR (Name of Department/Office) inspected the THE SCHOLARS VALLEY SR. SEC. SCHOOL, DHAMPUR on _____ and found that the THE SCHOLARS VALLEY SR. SEC. SCHOOL, NAGINA ROAD, DHAMPUR 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/UT Govt.

The above valid for a period of 2 YEARS.

Signature with Seal: 6/6/24

MEDICAL SUPERINTENDENT
C.H.C. DHAMPUR
(BIJNOR)

Name : DR MANAS CHAUHAN

Designation : MOIC CHC Dhampur

To,

THE SCHOLARS VALLEY SR. SEC. SCHOOL
NH-74, DHAMPUR - NAGINA ROAD
BEHIND SAI MANDIR, DHAMPUR.

(Name and Address of the Institution)

PRINCIPAL
THE SCHOLARS VALLEY