

PROFORMA FOR SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE

No.

Dated: 7.3.2024

It is certified that an inspection team headed by SANTHOSH KUMAR B.....(Name of Officers with designation) from HEALTH INSPECTOR.....(Name of Department/ Office) inspected the HEALTH Department, PHC Angady.....(Name & Address of the school) on 27/2/2024.....(date of inspection) and found that the Citadel Residential 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 norms prescribed by the Central/ State/ U.T. Govt.The above is valid for a period of one year 29/2/24 to 28/2/2025Signature with Seal: [Signature]Name: Dr. PraveenDesignation: Assistant Surgeon

Name & Address of the Office / Department:

PHC, Ranni, Angady, pathanamthitta

To

Principal
Citadel Residential School

(Name & 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.

[Signature]
Fr. JOBIN T JAMES
 PRINCIPAL
 CITADEL RESIDENTIAL SCHOOL
 ETTICHUVADU P. O., RANNI
 KERALA - 689 675



[Signature]
Manager
 Citadel Residential School
 Ettichuvadu P.O., Ranni