## PROFORMA FOR SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE

No.	Dated: 05 - 1/- KOK
	by Dor R. NAGARATU
(Name of Officers with designation) from	Medical officer
(Name of Department/ Office) inspected the	Medical & Health deputement.
(Name & Address of the school) on .05	(date of inspection) and found that the
facilities for the students and members of st	taff of the institution and is maintaining the hygienic
sanitation condition in the school building & t	the campus as per norms prescribed by the Central/
State/ U.T. Govt.	
The above is valid for a period of	year
**************************************	Signature with Seal: Repuis 105/11/22
*	Name DA-RIMAGARATU
	Designation : Medical Officer  Primary Health Centre
	Name & Address of the Aprille R D Kparrood (Dist.)
	NAME AND ADDRESS OF THE PARTY O

(Name & Address of the Institution)

CRR SECONDARY SCHOOL

DINNEDEVARAPADU, KURNOOL

<sup>\*</sup> 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.