## PROFORMA FOR SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE

No.	Dated: 21 02 2024.
It is certified that an inspection team headed byD.	CHALUKYA [AMO-PHCJENUGADDE
(Name of Officers with designation) from . Primas	4 Health Center Tenugadde.
(Name of Department/ Office) inspected the	S. POORNAPRATNA, Songanishway
(Name & Address of the school) on 12-01-20 H. P.S. POORNA PRATNA, Spete (Na	(date of inspection) and found that the
facilities for the students and members of staff of the sanitation condition in the school building & the camp	e institution and is maintaining the hygienic
State/ U.T. Govt.	
The above is valid for a period of	re with Seal: ವೈದ್ಯಾಧಿಕಾರಿಗಳು
Signatu	re with Seal: ವೈದ್ಯಾಧಿಕಾರಿಗಳು
Name	ಪ್ರಾಥಮಿಕ ಆರೋಗ್ಯ ಕೇಂದ್ರ, ಜೀನುಗದ್ಯೆ, ಚಿಕ್ಕಮಗಳೂರು ತಾಲ್ಲೂಕು
Designa	
Name &	Address of the Office / Department :
То	Dr. CHALUKYA.
H.P.S. POORNAPRAJNA	Administrative Medical Office.
Sangameshusas apete. Chekamagalusti-Tg. Dt. (Name & Address of the Institution) 577136.	Administrative Medical Office. PHC. Jemgadde.
3 1 1.33 /	

POORNAPRAJNA HIGH SCHOOL P.O. SANGAMESHWARPET - 57 - 36 CHIKMAGALUR TO. & DIST Secretary
Poornaprajna Education Centre,
Sangameshwarpet.

<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.