PROFORMA FOR SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE

No. 28674	Dated: c 8 \ o 6 \ 2 4
It is certified that an inspection to	eam headed by Pr. Sayali Dongra on) from Primary Health Center, Kale spected the Academic Heights Public School Kara
(Name of Officers with designati	on) from Primary Health Center, Kale
(Name of Department/ Office) in	spected the Academic Heights Public Schoo
Academic Height Rub	on
facilities for the students and me	embers of staff of the institution and is maintaining the hygienic building & the campus as per norms prescribed by the Central/
The above is valid for a period of	1. year Jan
	Signature with Seal: Primery Health Center, Kale
	Name : Dr. Sayali V Dongre. Designation : Medical Officer
	Designation : Medical officer
_	Name & Address of the Office / Department :
То	
Academic Heights	Public School, Kasay,
pist- satura, Mah	arashtra.

* 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.

ACADEMIC HEIGHTS
PUBLIC SCHOOL, KARAD

(Name & Address of the Institution)

School Management Committee