

Regel.

**CHIEF MEDICAL AND HEALTH OFFICE  
JAIPUR FIRST**

APPENDIX-VIII

**PROFORMA REGARDING SAFE DRINKING WATER AND SANITARY CONDITION CERTIFICATE**

18/05/26

Dis.No. 795

Date

It is certified that an inspection team headed by **Dr. Ravi Shekhawat, CM&HO Jaipur I** from **Chief Medical & Health office** inspected the **S.V. PUBLIC SCHOOL ADARSH NAGAR JAIPUR** and found that the **S.V. PUBLIC SCHOOL ADARSH NAGAR JAIPUR** 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 /U.T Govt.

The above valid for a period of **One Year**

Signature with Seal: \_\_\_\_\_

Name **Dr. Ravi Shekhawat**

अभिहित अधिकारी एवं  
मुद्राधिकारिता एवं स्वास्थ्य अधिकारी  
जयपुर प्रथम

Designation **CM&HO JAIPUR FIRST**

To

**DIRECTOR,  
S.V. PUBLIC SCHOOL  
ADARSH NAGAR JAIPUR**