

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

No. _____

Date: 07/08/2025

It is certified that an inspection team headed by D. M. Raju (Name of Officers
with designation) from CMS (Name of
Department/Office) inspected the Med. Superintendent
ST. XAVIERS SCHOOL (Name & Address of
the School) on 07/08/2025 and found that the ST. XAVIERS
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 the norms
prescribed by the Central/State/U.T Govt.

The above valid for a period of 7/8/25 to 7/8/26

Signature with Seal : _____

Name : _____

Designation : _____

To

ST. XAVIERS SCHOOL
TAKHA PASCHIM
PAKKHANPUR, SHAHGANG, JAUNPUR (U.P.)
(Name & Address of the Institution)