

Sent by e-Mail

No.EDN-U(G-II)Elem/Gen(WIFS)- 12/3

Office of the

Deputy Director of Elementary Education

Una,Distt.Una(H.P.)

Dated:-

Una, the 04 April,2019

To,

✓ All the Block Elementary Education Officers,
Una, Distt. Una (H.P.)

Subject:-

Regarding provide the monthly report of Folic Acid Tablets(WIFS).

Sir,

On the subject cited above, You are directed to submit the report regarding Folic Acid Tablets supplied to you by this office according to attached performa before 6th of every month. It is your information and necessary compliance.

Encls:-Performa

Sampr
4.4.19
Dy. Director Elementary Education
Una,Distt.Una(HP)

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**WEEKLY IRON FOLIC ACID SUPPLEMENTATION PROGRAMME (WIFS)
HIMACHAL PRADESH
MONTHLY DISTRICT REPORT**

(To be submitted to Director of Higher Education / Elementary Education / SPO latest by 20th of every following month)

Name of District:		Reporting month and year:			
Total number of schools (6-12 th classes) in the District		Total numbers of Nodal Teachers:			
Target Population :	Girls:	Boys:	Teachers:	Helpers:	
Opening stock of IFA:	Date of supply IFA:		Batch Number & date of Expiry of IFA:		
Quantity of IFA received:	Boys		Teachers & Helpers	Total	
Population covered in the reporting month	Girls				

Signature of MOH

OR

Signature of Dy. Director of Higher Education

Dy. Director of Elementary Education