

Office of the Director of
Higher Secondary Education,
Housing Board Building,
Santhi Nagar,
Thiruvananthapuram.
Dated: 02.03.2015

CG & AC 17150/2014

Circular

Sub:- Souhrida Club -Forwarding of Annual Activity Report of the year 2014-15 -
reg

Ref:- G.O.(Rt)3369/2014/Gl.Edn dated 22/08/2014

As per reference cited Administrative sanction has been accorded to implement Souhrida Club programme in Higher Secondary Schools for the year 2014-15. Accordingly fund was allotted to each school for conducting school level activities.

Principals/Souhrida Co-ordinators of these schools are hereby directed to forward the report of the activities so far conducted, and utilization certificate before **20th March 2015** to the following address.

State Co-ordinator
Career Guidance and Adolescent Counselling
Directorate of Higher Secondary Education
Housing Board Buildings,
Santhi Nagar, Thiruvananthapuram-1.

Format of report and utilization certificate is enclosed. Report neatly typed should be in A4 size paper. Vouchers/Receipts of the expenditure incurred in conducting the programme should **NOT** be forwarded along with the Report.

Amount issued through allotment letter from the DHSE only should be included in the Utilization Certificate. (Fund allotted through demand draft for conducting Road Safety Programme should not be included in the Utilization Certificate).

Fund for School level Activities for the year 2015-16 will be allotted to Schools that have submitted Annual Activity Report and Utilization Certificate in time.

Sd/-
DIRECTOR

DEPARTMENT OF HIGHER SECONDARY EDUCATION
CAREER GUIDANCE & ADOLESCENT COUNSELLING CELL
SOUHRIDA CLUB
Annual Activity Report
2014-15

1. Name of School
2. District
3. School Code
4. Phone No. of the School
5. Year of starting the Souhrida Club
6. Details of Souhrida Co-ordinator during the Academic Year 2014-15

Sl.No	Name and Designation	From	To

7. Mobile No. of the present Souhrida Co-ordinator
8. Details of Programme conducted (KNOW THYSELF)

Sl.No	Name and Designation of Resource Person	Subject of the programme	Date of the programme
1			
2			
3			
4			
5			

6			
7			
8			
9			
10			

Add additional Sheets if required

9. Details of **Amma Ariyan** Programme conducted:

Date and Venue	Name of Faculty and Designation	No. of Mothers attended the meeting

10. List of Class Convenors

Sl.No	Name	Class

11. Name of School Convenors

Sl.No	Name	Class

12. Details of Students attended Two Days Student's Residential Training Programme.

Name and class of Students attended the training Programme	Venue at which students attended the programme

13. Whether Drop Box have been placed in the school. Number of issues received from the Drop Box and mention the general issues

14. Whether Board of the Souhrida Club is placed in the school

15. Number of interventions (Counselling) made by the Souhrida Co-ordinators. Mention the main problems faced by the students identified during the interventions

16. Number of cases reported to Kerala Mahila Samakhya Society/Child Line/Others. Specify the main issues of students for which the case was reported.

17. Any case of suicide or suicidal attempt reported from your School. If 'yes' give the number of attempt/suicides with reason.

18. Whether Souhrida Co-ordinator attended the Refresher Training Programme conducted at the district level. If so, name of the centre at which attended

19. If the Souhrida Unit is sanctioned during the year 2014-15, whether the Souhrida Co-ordinator attended the Four Days Introductory Training for New Souhrida Co-ordinators. If so give the details of the centre at which attended.

Phase	Venue and date
First Spell	
Second Spell	

20. Whether Souhrida Co-ordinator attended the FOCUS POINT Programme organized by the DHSE. If so name the centre at which attended.

21. Details of Road Safety Programme conducted in the School with the financial assistance of the Director (Applicable to units of Thiruvananthapuram, Alappuzha, Ernakulam and Thrissur districts)

Sl.No	Programme	Date of Programme
1	Awareness Programme	
2	Poster Exhibition	
3	Street Level Programme	
4	Competition	

22. Details of the Registers and Files maintained by the Souhrida Co-ordinator in the School.

23. Finance

Amount received from the Directorate	Amount utilized	Balance amount	Details of Refund

24. Details of other programmes conducted in the school by the Souhrida Club Unit

Sl. No	Target/Beneficiary Group	Type of Programme	Date and Venue of Programme	Name and Designation of Resource Person

Give descriptive details of innovative programme conducted in your school (in separate sheet) with photos

25. Your suggestions for improving Souhrida Club programme in the next year.

26. Suggest any new programmes to be included in the next year.

Signature of Souhrida Co-ordinator

Counter Signature of the Principal

Place

Date

(Seal)

DEPARTMENT OF HIGHER SECONDARY EDUCATION
CAREER GUIDANCE & ADOLESCENT COUNSELLING CELL
SOUHRIDA CLUB

Name of School :
District :
School Code :
Amount Sanctioned :
Date of Encashment :
Name of Treasury :

UTILISATION CERTIFICATE
2014-15

Certified that an amount of Rs.....(Rupees.....
.....) has been
utilized for conducting Souhrida Club activities in school out of the fund allotted for the
school level activities under the head of account 2202-02-109-74(P) during the financial
year 2014-15

Place

Dated Signature
Name of the Principal
Mobile No.

(Seal)