

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

CG&AC/55441/2014

Dated: 06/10/2015

Circular

Sub:- Quality Improvement Programme-Snehapoorvam-Forwarding of Report &
Utilization Certificate -reg
Ref:- Government Order No. G.O. (Rt) 3369/2014/Gl.Edn dated 22/08/2014

As per reference cited Administrative sanction has been accorded to implement Snehapoorvam programme in 91 schools during the year 2014-15. Accordingly necessary funds were allotted to each school for conducting the programme. List of schools attached

Principals of the schools are directed to forward the report of the activities so far conducted, and utilization certificate before **17/10/2015** 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 enclosed.

State Co-ordinator

To

1. The Principals

List of Schools and amount sanctioned

Sl.No	School Code	School Name	No. of Students included in QIP	Amount Sanctioned
1	1007	GOVT. HSS, MEDICAL COLLEGE, TRIVANDRUM	90	54200
2	1015	GOVT. BOYS HSS, PETTAH, TRIVANDRUM	60	44300
3	1017	GOVT. HSS,VETTOOR, TRIVANDRUM	45	33850
4	1041	GOVT BOYS HSS, CHALAI, TRIVANDRUM	45	33850
5	1044	GOVT TAMIL HSS, CHALAI,TRIVANDRUM	45	35350
6	1057	ST. MARY'S HSS, VETTUKAD, TRIVANDRUM	75	44750
7	1067	IQBAL HSS, PERINGAMALA, TRIVANDRUM	105	60150
8	1134	GOVT. BOYS HSS, KARAMANA, TRIVANDRUM	30	28900
9	2041	SN HSS CHITHARA, KOLLAM	90	57200
10	2046	S.V HSS, CLAPPANA, KOLLAM	105	63150
11	2054	CHEMPAKASSERY HSS, POOTHAKULAM, KOLLAM	105	66150
12	2102	GOVT. HSS, PERINGALAM, KOLLAM	30	28900
13	3003	GOVT. HSS, EZHUMATTOOR, PATHANAMTHITTA	45	33850
14	3012	EDAMURI GOVT HSS, RANNI, PATHANAMTHITTA	45	33850
15	3014	GOVT HSS, KADUMEENCHIRA, PATHANAMTHITTA	45	33850
16	3032	S N D P HSS, CHENNEERKKARA, PATHANAMTHITTA	90	52700
17	3037	SNDP HSS, MUTTATHUKONAM, PATHANAMTHITTA	45	33850
18	3041	HSS,SEETHATHODE,PATHANAMTHITTA	45	33850
19	3046	CMS HSS,KUZHICKALA, PATHANAMTHITTA	45	33850
20	3072	GOVT. HSS, KISUMAM, PAMBAVALLY, PATHANAMTHITTA	30	27400
21	3079	GHSS, AYIROOR, PATHANAMTHITTA	30	27400
22	4008	GOVT HSS, KUNNAM, ALAPPUZHA	60	44300
23	4009	GOVT HSS, PERUMPALAM, ALAPPUZHA	45	36850
24	4014	GOVT HSS, THIRUVANVANDLOOR, ALAPPUZHA	75	47750
25	4026	GVHSS MULAKKUZHA, ALAPPUZHA	60	42800
26	4039	M S M HSS, KAYAMKULAM, ALLAPPUZHA	135	74550
27	4053	PADANILAM HSS, NOORANAD, ALAPPUZHA	60	39800
28	4070	KV SANSKRIT HSS, MUTHUKULAM, ALAPPUZHA	60	42800
29	4071	PKKSM HSS,KAYAMKULAM, ALAPPUZHA	60	42800
30	4101	VALIYAZHEEKAL GOVT. HSS, ALAPPUZHA	30	28900
31	4102	SN TRUST HSS, CHERIYANAD, ALAPPUZHA	60	42800
32	5002	GOVT. HSS, KADAPPOOR, KOTTAYAM	60	42800
33	5011	GOVT. HSS, VADAKKEKKARA, KOTTAYAM	30	28900
34	5017	GOVT HSS, AREEPARAMBA, VIJAYAPURAM, KOTTAYAM	45	33850

35	5018	GOVT HSS,KUDAMALLOOR, KOTTAYAM	45	33850
36	5022	GOVT HSS,TV PURAM,KOTTAYAM	30	28900
37	5118	GHSS, PAIPPAD, KOTTAYAM	30	28900
38	6002	GOVT TAMIL HSS, DEVIKULAM, IDUKKI	45	36850
39	6007	CPM GOVT HSS, PEERUMEDU, IDUKKI	45	36850
40	6014	GOVT VHSS, RAJAKUMARI, IDUKKI	15	19450
41	6059	VAGAVARRAI GOVT. HSS, IDUKKI	15	19450
42	6068	Govt. HSS, VAGAMON, IDUKKI	30	28900
43	6070	GHSS VATTAVADA, IDUKKI	23	26590
44	7008	GOVT HSS , SIVANKUNNU, MOOVATTUPUZHA , ERNAKULAM	60	44300
45	7031	GOVT SANSKRIT HSS, THRIPOONITHURA, ERNAKULAM	45	32350
46	7148	GOVT. HSS, EZHIPURAM SOUTH, ERNAKULAM	30	28900
47	8030	GOVT HSS,EDAVILANGU,THRISSUR	45	33850
48	8031	GOVT NALANDA HSS, KIZHUPILAKKARA, THRISSUR	45	33850
49	9025	GOVT HSS, MUTHALAMADA , PALAKKAD	75	47750
50	9054	C B K M PANCHAYATH HSS PUTHUPARIYARAM, PALAKKAD	60	39800
51	9077	GOVT. TRIBAL HSS, SHOLLAYAR, MANNARKKAD, PALAKKAD	45	35350
52	9085	PUTHUR TRIBAL GOVT. HSS, PUTHUR, PALAKKAD	30	28900
53	9106	GOVT.HSS, THENKURISSI, PALAKKAD	60	43300
54	9121	PGP HSS, POPPULLY, PALAKKAD	45	36850
55	9126	SMM HSS, PAZHAMBALACODE, PALAKKAD	45	38350
56	9127	CA HSS PERUVEMBA, PALAKKAD	45	36850
57	9131	RPM HSS, PANANGATTIRI, PALAKKAD	45	36850
58	9133	VIM HSS, PALLASSANA, PALAKKAD	45	33850
59	9147	HSS, KUTHANUR, PALAKKAD	45	36850
60	9149	Dr. KB MENON MEMORIAL HSS THRITHALA, PALAKKAD	45	33850
61	10177	KRHSS, PURAMERI, KOZHICKODE	45	36850
62	11031	GOVT HSS,PANG, MALAPPURAM	75	49250
63	11120	GOVT. HSS, CHERIYAMUNDAM, MALAPPURAM	75	46250
64	11129	GOVT. HSS, VELIANCODE, MALAPPURAM	60	42800
65	11138	GOVT HSS, ALIPARAMBA, PERINTHALMANNA, MALAPPURAM	75	49250
66	11143	GVHSS, PARAVANNA, MALAPPURAM	60	44300
67	11148	GOVT. HSS, PALAPPETTY, MALAPPURAM	60	42800
68	11229	BEM HSS, PARAPPANANGADI, MALAPPURAM.	45	33850
69	11231	THARAKAN HSS, ANGADIPPURAM, MALAPPURAM	60	39800
70	12041	GOVT HSS ,NIRAVARAM, WAYANAD	45	36850
71	12050	GHSS, ACHOOR, WAYANAD	30	27400
72	12053	CMS HSS, ARRAPPETTA, WAYANAD	30	28900
73	13039	GOVT HSS, VADAKKUMPAD, KANNUR	60	42800
74	13112	GOVT. HSS, KAVUMBHAGAM, KANNUR	45	39350
75	13140	PGM GOVT.HSS, CHERUVANCHERY, KANNUR	30	28900
76	13142	RAJAS HSS, CHIRAKKAL, KANNUR	45	33850

77	13166	B E M P HSS, THALASSERY, KANNUR	45	33850
78	14013	GOVT HSS, PADRA, ENKANJE, KASARGODE	30	27400
79	14018	GOVT HSS, PADNEKADAPPURAM, KASARGODE	45	36850
80	14040	GOVT. VHSS, THALANGARA, KASARGODE	30	28900
81	14046	GOVT. HSS, BELLERU, KASARGODE	30	28900
82	14047	GOVT. HSS, PADLA, KASARGODE	30	28900
83	14058	GOVT. HSS, ADHOOR,	30	27400
84	14062	G.V.HSS, MOGRAL, KASARGODE	15	19450
85	14067	GOVT. HSS, SHIRIYA, KASARGODE	15	19450
86	14068	G.F. HSS, BEKKAL, KASARGODE	45	33850
87	14080	GOVT HSS, KOTTODI, KASARGODE	30	27400
88	14081	GHSS PAIVALIKA, KASARGODE	30	27400
89	14090	GHSS, PAKKAM, KASARGODE	30	28900
90	14091	GHSS UPPILIKKAI, KASARGODE	30	28900
91	14101	GHSS, PANDI, KASARGODE	15	19450

DEPARTMENT OF HIGHER SECONDARY EDUCATION
CAREER GUIDANCE & ADOLESCENT COUNSELLING CELL
Quality Improvement Programme
Report 2014-15

1. Name of School
2. District
3. School Code
4. Phone No. of the School
5. Name and Mobile number of the Principal
6. Details of students selected under the programme

Sl. No.	Class	Number of Students

7. Number of days remedial coaching conducted
8. Details of classes taken by the teachers under this programme

Sl. No.	Date of Class	Time	Name	Subject
1				
2				
3				
4				

5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				

(Attach sufficient additional sheets)

9. Details of student's attendance

Sl. No.	Name	Class	Number of days attended

(Attach sufficient additional sheets)

10. Details of Motivational Class Conducted

- a. Date of Class
- b. Name and Designation of Faculty

- c. Amount utilized for Motivational Training
- d. No of students attended
- e. Venue of the class

11. Details of Expenses related to Refreshment Expenses

Sl.No	Date	Amount Utilized
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

11		
12		
13		
14		
15		
16		
17		
18		
19		
20		
TOTAL		

12. Details of Contingency Expenses

Sl.No	Date	Purpose	Amount Utilized
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
TOTAL			

13. Abstract

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

14. Whether advance drawn by the Principal has been settled at the treasury?
If so attach a copy of the settlement Proceedings.

15. Your suggestions for improving Quality Improvement Activities in the next year.

Name and Signature of the
Principal

Place
Date

(Seal)

**DEPARTMENT OF HIGHER SECONDARY EDUCATION
CAREER GUIDANCE & ADOLESCENT COUNSELLING CELL**

QUALITY IMPROVEMENT PROGRAMME-2014-15

Name of School :

District :

School Code :

Amount Received from DHSE

Date of encashment

UTILISATION CERTIFICATE

Certified that an amount of Rs.....(Rupees.....
.....) has been utilized for conducting
QUALITY IMPROVEMENT PROGRAMME under the head of account 2202-02-109-74(P)
during the financial year 2014-15

Sl.No	Particulars	Sanctioned Amount	Amount Utilized
1.	Refreshment Expenses for Students		
2	Honorarium for Teachers		
3.	Honorarium for Convenor		
4	Honorarium for Principal		
5	Contingency Expenditure		
6	Motivational Class		
TOTAL			
Details of Refund Amount, Chalan No and date Name of Treasury (attach copy of chalan)			

Place

Date

Name and Signature of the Principal

Mobile No.

(Seal)