

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

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Dated: 09-02-2016

CG & AC 35092/2015

Circular

Sub:- Souhrida Club -Forwarding of Annual Activity Report of the year 2015-16 -
reg

Ref:- G.O.(Rt) 2927/2015/Gl.Edn dated 20/07/2015

As per reference cited, Government have accorded administrative sanction to implement Souhrida Club programme in Higher Secondary Schools for the year 2015-16 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 **25th February 2016** 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 should be in A4 size paper. Vouchers/Receipts of the expenditure incurred in conducting the programme should **NOT** be forwarded along with the Report.

Fund for School level Activities for the year 2016-17 will be allotted to Schools that have submitted Annual Activity Report and Utilization Certificate in time.

Sd/-
K.V Mohankumar IAS
Director

DEPARTMENT OF HIGHER SECONDARY EDUCATION
CAREER GUIDANCE & ADOLESCENT COUNSELLING CELL
SOUHRIDA CLUB
Annual Activity Report
2015-16

1. Name of School
2. District
3. Educational District
4. School Code
5. Phone No. of the School
6. Year of starting the Souhrida Club
7. Details of Souhrida Co-ordinator during the Academic Year 2015-16

Sl.No	Name and Designation	From	To

8. Mobile No. of the present Souhrida Co-ordinator
9. 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

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

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

11. Whether Souhrida Day Programme has been conducted in your school. Give details of the guest of the day and number of skits presented by the students. Whether prizes has been given to best skit performance

12. List of Class Convenors

Sl.No	Name	Class

13. Name of School Convenors

Sl.No	Name	Class

14. 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

15. Whether volunteers have been selected in your school. If so number of volunteers selected. Give the name of volunteers and class (in separate sheet).

16. Details of activities taken up by the vounteers.

Sl.No	Name of Programme	Date and venue of Programme	No. of volunteers participated

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

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

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

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

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

22. Whether Sourhida Veda Meeting have been convened. If so, give following details

Sl.No	Date of Meeting	No of persons attended the meeting	Major decisions taken

23. Whether Sourhida Co-ordinator has attended the Educational district level meeting. If so, name of the centre at which attended

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

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

26. 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.

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 :
Details of refund :

UTILISATION CERTIFICATE
2015-16

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. The balance amount of Rs..... has been refunded vide chalan
No.dated atTreasury.

Place

Dated Signature

Name of the Principal

Mobile No.

(Seal)