



# Punjab Education Foundation

Department of the New School Program  
78/B-I, M.M.Alam Road, Gulberg-III, Lahore.  
Ph # 042-99268125, 042-99268114-17



## NSP Monthly Update Form

School Name \_\_\_\_\_

Address : \_\_\_\_\_

Owner Name : \_\_\_\_\_ Contact # : \_\_\_\_\_

Principal Name : \_\_\_\_\_ Contact # : \_\_\_\_\_

Date: \_\_\_\_\_

District \_\_\_\_\_

Tehsil \_\_\_\_\_

School Code \_\_\_\_\_

School Level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	School Type	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Primary	Elementary	Secondary		Boys	Girls	Co.Edu.
School Timing	From: _____			To: _____			

### Student Enrollment Record:

Previous Class Wise Breakup: (for the month of \_\_\_\_\_)

Class	Nursery	Prep	1	2	3	4	5	6	7	8	9	10	Total
Sections													
Boys													
Girls													
Total													

Total Boys: \_\_\_\_\_ Total Girls: \_\_\_\_\_ Total Previous Enrollment: \_\_\_\_\_

Difference of enrollment from previous month

Current Class Wise Breakup: (for the month of \_\_\_\_\_)

Class	Nursery	Prep	1	2	3	4	5	6	7	8	9	10	Total
Sections													
Boys													
Girls													
Total													
White Board													
Furniture													
Fans													
Lights													
Doors													

Boys -----

Girls -----

Total Boys: \_\_\_\_\_ Total Girls: \_\_\_\_\_ Total Previous Enrollment: \_\_\_\_\_

### Infrastructure Detail

Description	Total Numbers (Qty)	Numbers in Good Condition	Numbers in Poor Condition	Remarks (if any)
Principal Office				
Staff Room				
Class Rooms				
Water Points				
Toilets				
Computer Lab				
Science Lab				

# NSP Monthly Update Form

Date: \_\_\_\_\_

Staff Detail						
#	Name	Qualification	Class	Appiontment Date	Salary (Rs.)	Signature
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						

Summary					
	Description of Staff	Teaching	Non-Teaching	Total	
	Male				
	Female				
	Total				

Name of Any New Staff oppointed : \_\_\_\_\_

Name of Any Staff terminated : \_\_\_\_\_

Certified that above stated information is correct to the best of my knowledge and no fact has been canceled or misreported.

<b>Principal/Owner Name :</b>	_____
<b>Principal/Owner Signature with Date :</b>	_____
<b>School Stamp:</b>	_____