

AHLCON PUBLIC SCHOOL

The National Deworming Day is an initiative of Ministry of Health and Family Welfare, Government of India with Department Of Education to make every child in the country worm free. This is one of the largest public health programs reaching large number of children during a short period.

According to World Health Organization 241 million children between the ages of 1 and 19 years are at risk of parasitic intestinal worms in India, also known as **Soil-Transmitted Helminths (STH)**.

STH Infections can lead to anaemia, malnutrition, impaired mental and physical & cognitive development, and reduced school participation.

Objective of National Deworming Day:

The objective of National Deworming Day is to deworm all preschool and school-age children (enrolled and non-enrolled) between the ages of 1-19 years through the platform of schools and Anganwadi Centers in order to improve their overall health, nutritional status, access to education and quality of life.

Key Stakeholders:

The Ministry of Health & Family Welfare, Government of India is the nodal agency for providing all States/UTs with guidelines related to National Deworming Day (NDD) implementation at all levels.

The programme is being implemented through the combined efforts of Department of School Education and Literacy under Ministry of Human Resource and Development, Ministry of Women and Child Development and Ministry of Drinking Water and Sanitation.

HEALTH AND SOCIAL WELFARE CLUB



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Ref. No.

Dated.....6/8/19.....

Dear parents,

The Department Of Education is conducting **National Mass Deworming** on 8th of August 2019, followed by Mop-Up Day on 16th August 2019.

We are looking forward to get consent for the same.

The consent form is attached with the letter. If interested, submit the duly filled form to the class teacher.


Principal

CONSENT

I allow my ward _____ of class _____ to participate in **National Mass Deworming** Programme on 8th August 2019, followed by Mop-Up Day 16th August 2019, organised by **Department Of Education**.

Name & Contact Number

Parent's Signature-