

**Pradhan Mantri Poshan Shakti Nirman (PM POSHAN)
School Monthly Data Capture Format (MDCF)**

Instructions: Keep following registers at the time of filling the form:-

1) Enrolment Register. 2) Account 3) Bank Account Pass book. 4) Cooking cost details etc.

1. School Details

Month-Year		UDISE Code		School Name	
Type	Government <input type="checkbox"/>	Local Body <input type="checkbox"/>	EGS/AIE Centers <input type="checkbox"/>	NCLP <input type="checkbox"/>	Madras / Maqtab <input type="checkbox"/>
Category	Primary <input type="checkbox"/>	Upper Primary <input type="checkbox"/>	Primary with Upper Primary <input type="checkbox"/>		
State / UT-	District-		Block/NP-		Village/Ward-
Kitchen Type-	NGO/SHG-		Enrolment-		

2. Meals Aailed Status

	Bal Vatika	Primary	Upper Primary
Number of School days during month			
Actual number of days Mid Day Meal served			
Total Meals served during the month			

3. Fund Details (in Rs.)

Component	Opening Balance	Received during the Month	Expenditure during the Month	Closing Balance
Cooking Cost - Bal Vatika				
Cooking Cost - Primary				
Cooking Cost - Uper Primary				
Cook Cum Helper				
School Expenses : MME Expenses				

Whether the Sum of above Closing Balance matches with Bank Account Closing Balance. Yes No

4. Cook Cum Helper Payment Details

S.No.	Cook Name	Gender (M/F)	Category (SC/ST/OBC/GEN)	Payment Mode (Cash/Bank)	Amount Received during month (In Rs.)
1					
2					
3					
4					

5. Food Grains Details (in KG.)

Category	Food Item	Opening Balance	Received during the Month	Consumption during the Month	Closing Balance
Bal Vatika	Wheat				
	Rice				
Primary	Wheat				
	Rice				
Upper Primary	Wheat				
	Rice				

6. Children Health Status

No. of children from class 1 to 8 who had received 4 IFA tablets (Boys) -	
No. of children from class 1 to 8 who had received 4 IFA tablets (Girls)	
No. of children screened by mobile health (RBSK) team	
No. of children referred by mobile health (RBSK) team	

7. School Inspection

School Inspection done during the month	Yes	No
By Members of Task Force	<input type="checkbox"/>	<input type="checkbox"/>
By District Officials		
By Block/Taluka Level Officials		
By SMC Members		

Number of Untoward Incidents Occurred	
---------------------------------------	--

.....
Signature of the SMC Chairperson / Gram Pradhan

.....
Signature of Head Teacher