



GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI  
DIRECTORATE OF EDUCATION: SCHOOL BRANCH  
OLD SECRETARIAT: DELHI-110054

No.F DE.23 (386)/Tobacco/Sch. Br./2018/ 1270

Dated: 28/08/2018

**CIRCULAR**

**Sub:- National Tobacco Control Programme (NTCP) - Monthly Reporting  
Performa for Schools under Directorate of Education.**

In reference to circular No.F.DE.23(386)/Tobacco/Sch.Br./2018/1056 dated 19.07.2018 regarding measures for making schools 'Tobacco Free Zones', all the Heads of Govt., Govt Aided & Unaided Recognized Schools under Directorate of Education are directed to use the enclosed Proforma-A for monthly report of Tobacco awareness and enforcement. **The proforma is to be filled on monthly basis by the schools and to be sent to the respective district Health Office (CDMO) with a copy to Directorate General of Health Services (State Tobacco Control Office), Pt. Deep Chand Sharma Sahkar Bhawan, 2<sup>nd</sup> Floor, Sector-20, Phase-1, Dwarka, New Delhi-110077.** Rest of the contents of the above mentioned circular will remain the same.

This issues with prior approval of the Competent Authority.

Encl: as above

*[Handwritten Signature]*  
28/8/18

DDE(Schools)

All Heads of Govt., Govt. Aided and Unaided Recognised schools under Directorate of Education through DEL-E

No.F DE.23 (386)/Tobacco/Sch. Br./2018/ 1270

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Copy to:

1. PS to Secretary (Education).
2. PS to Director (Education)
3. All RDEs/ DDEs (District/Zone)DEOs for ensuring compliance.
4. SO (IT) to please upload it on the website.
5. Guard file.

*[Handwritten Signature]*  
28.8.18  
OSD (Schools)

275/c

**LAST DAY OF EVERY MONTH IS DRY DAY FOR TOBACCO IN DELHI**

**DELHI STATE NTCP REPORTING FORMAT FOR EDUCATIONAL INSTITUTE**

**Performa-A**

**Monthly report of Tobacco awareness and enforcement for the month of.....**

1. Name of the District-
2. Name of the Educational Institute -
3. Name & contact number of notified nodal officer-
  - a) Whether has been sensitized/trained under NTCP-Yes (date-.....) or No
4. Whether mandatory Tobacco Free Zone Boards & No Smoking Signages with contact details of nodal officer displayed- Yes/No
5. Tobacco Free School Committee constituted- Yes (date-..... ) or No
6. Number of inspections done in the month to check any Tobacco vendor within 100 mtr. radius of school-.....
  - a) Any tobacco vendor found within 100 mtr. radius of school-
    - i) If yes, what action has been taken -
7. Number and type of awareness activities conducted in the month-
  - a)
  - b)
  - c)
8. Activities conducted on 'Dry Day For Tobacco' on last day of the month-
9. "1FOR1" campaign: To adopt a tobacco user to assist him/her to quit:  
Click on the link to enrol- <https://www.change.org/p/smokers-eliminate-tobacco-from-your-life-before-it-eliminates-you>
  - a) Number of staff/students enrolled in reporting month.....
  - b) Cumulative total enrolled till date.....
  - c) Regular Follow up/Facilitation.....
10. Any student found using tobacco products-
  - a) If yes action taken-
11. Any Challan issued with amount for violation of smoking within the school premises-

Date:

Authorised Signatory  
Name/Designation with stamp

**Note:**

**Toll Free Complaint Number: 1800110456**  
**Toll Free National Tobacco Quit line no.: 1800112356**  
**Mobile Tobacco Cessation: Give Miss Call from your mobile at: 01122901701**  
**Feedback: [ntcpdelhistate@gmail.com](mailto:ntcpdelhistate@gmail.com)**