

Annexure-I

**DECLARATION / UNDERTAKING BY THE PARENTS**  
(for offline Classes Academic Session in campus)

Student Name	
Enrolment/Reg.No./Roll No	
Academic Year/ Batch	
Program/ Branch	
Institute / Department	

I, \_\_\_\_\_ (Father / Mother) of \_\_\_\_\_ do hereby give Consent/agree to allow my son/daughter to attend offline classes in the Medical College campus and Hospital. The Institute carries no responsibility in case the student tests positive for COVID 19. Further the student will follow COVID -19 appropriate behaviour.

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

Signature of Parents

Mobile No. Of Parent: .....

Email id of Parent: .....

**DECLARATION/UNDERTAKING BY THE STUDENT**

I, \_\_\_\_\_ (Name of the student ) do hereby voluntarily agree to attend offline /onsite academic sessions in college campus and I will follow COVID-19 guidelines issued by the Government / District Administration / Pt. JLN GMC Chamba from time to time. I hereby give undertaking that:

1. Understand and agree that participation in offline/in person is voluntary and is a privilege.
2. Ensure that I understand the risks of COVID -19 and shall adhere to the COVID -19 guidelines issued by the Governments / District Administration / Pt. JLN GMC Chamba from time to time.
3. Acknowledge that I will take all necessary precautions while travelling to the campus for offline academic session.
4. Acknowledge that I will behave in a responsible manner during my stay in campus and outside. I am also aware that any risky behaviour /deviation for following the precautionary norms can harm to self and others.

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

Signature of the Student

Mobile No. of Student:.....

Note:

1. Kindly take a printout of this letter, fill the appropriate details, sign by the parent /student and send the scanned copy of the same to the College email: [stu.sec.gmcchamba@gmail.com](mailto:stu.sec.gmcchamba@gmail.com)
2. Hard copy of the same to be submitted in the Principal Office on arrival to the campus.