

## UNDERTAKING FROM PARENT

I, \_\_\_\_\_ parent of \_\_\_\_\_

Roll No \_\_\_\_\_ Course \_\_\_\_\_ Sem \_\_\_\_\_ Studying in **Institute of Hotel Management Catering Technology & Applied Nutrition, Rohtak (hereinafter referred to as "Institute")** declare that I have no objection to my child voluntarily going to Institute to attend physical classes.

I further declare that

- i) I understand the risks of COVID-19 transmission which exist in the present situation.
- ii) My child is maintaining good health and is not suffering from any illness at the moment.
- iii) I will not send my child to the Institute if he/she is unwell and displays any symptoms of COVID-19 like cough, fever, difficulty in breathing, bodily weakness etc.
- iv) I will immediately inform the Institute authority and the State Health authorities if any signs of illness appear in my child.
- v) I will be available at short notice to receive my child from the Institute if he/she becomes unwell while in the Institute.
- vi) My child will adhere to the guidelines of the Government and Institute regarding COVID-19 pandemic.
- vii) We are aware of the facility of online classes currently being provided by the Institute; still I would like my children to attend physical classes in the Institute for his own benefit.

Signature of parent:

Name:  
Mobile Number:  
E-mail:  
Date:

Signature of Student

Name:  
Mobile Number:  
E-mail:  
Date: