

Feroze Gandhi Institute of Engineering & Technology

Undertaking by Student

Date...../...../2020

Respected Sir/Madam

I have gone through and understood the guideline and protocols of the Institute, pertaining to resumption of studies. I state that I am aware that it is entirely voluntary for me to return to the institute and that I am doing study at the Institute in the current COVID-19 Pandemic.

I, am returning/returned from,
.....

.....(Mobile number.....) on/.....2020.

I declare that

- None of my family members where I was living (.....), is suffering from fever, cough and breathing problem past 2 weeks.
- I am not having any disease like diabetes, hypertension or heart/kidney related disease, etc.
- I will wear face mask as well as any other prescribed protective gear and maintain physical social distancing in my class room/Laboratories /academic area/hostels and in Feroze Gandhi Institute of Engineering & Technology.
- I will regularly wash my hands with soap and water for at least 40 seconds or clean them with alcohol based sanitizer.
- I will use Aarogya Setu and Cova Apps on my mobile and they will remain active at all times (through Bluetooth and Wi-Fi)
- I will self-monitor my health every day after I return to the Institute. In case, I develop fever, cough, flu-like symptoms and / or breathing problem then I will inform about it to my supervisor / in charge / Head of department etc. Also I will consult a doctor and follow medical advice.
- I understand that there is always a possibility of getting infected by the virus. My parents/ guardians are also fully aware of my wish to return to the campus to start working in the laboratories and other offices for my research related activities.
- However in case of COVID-19 infection I may require Isolation, Treatment and / or hospitalization outside the campus, for which I will follow government laid down protocols.

• Enrollment / Roll Number and Signature of the Student :

• Emergency Contact 1:

Emergency Contact 2:

• Signature of Parents:

I agree with the above request made by the student that the nature and/ or stage of the study being conducted by him/ her is such that it cannot be Subjected to any further delay, nor can it be done from home. I affirm that I have not exerted any pressure in making the student decide to return to the Institute. I shall coordinate the well being of the student with the help of available Institute facilities in case of any COVID-19 related emergency.

Signature of the Head of the Department

Signature of Director