

Date:

Consent / Self-discloser Certificate for sending the ward to the college

Name of the Student	
Reg. No	
Mobile No.	
Student Blood group	
Residential Address	
Father's Name	
Mobile No.	
Mother's Name	
Mobile No.	

I hereby wish to give my consent to send my son/daughter to your College studying in

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My son/daughter is well aware of the preventive measures and the precautionary measures in not coming in contact with the virus and in not spreading the COVID-19 to any of the co-students / teachers.

I also submit that neither myself nor any of my family member have been infected / availed treatment for COVID-19 at the time of joining to college/classes.

Signature of the Student

Signature of the Parent
Father / Mother / Legal Guardian