

Undertaking

I, hereby, promise to abide by the COVID-19 protocols of the institution and also to follow the Code of Conduct prescribed for the Students of the Institution, as in force from time to time and subsequent changes/modifications/amendment made thereto.

I acknowledge that, the Institution has the authority for taking punitive actions against me for violation and/or non-compliance of the same.

I hereby acknowledge, the Institution cannot guarantee the complete elimination of risks caused by COVID-19 through the implementation of the precautions and protocols.

I will have my own mask, face-shield and sanitizer always and use it. I will use gloves of my own during posting in the hospital.

I also know that, I may get infection from the hospital and I will take every precaution to prevent this from happening. At the same time, I will not hold Doctors and hospital management responsible, if such infection occurs to me. If any such untoward event occurs to me, I will meet all expenses for the treatment and other loss.

If I am subclinical or asymptomatic carrier or an undiagnosed patient with Covid19, I fully understand, it may endanger doctors, hospital staff and patients. So it is my responsibility to take appropriate precautions of safe distance, not to touch, wash hands, not to cough or sneeze unprotected and to follow the prescribed protocols.

I, hereby declare that, I shall be solely responsible for my involvement in any kind of undesirable / indisciplinary activities inside the campus, and shall be liable for disciplinary actions as per the rules and regulations of the Institution.

I, further understand that, the Institution shall not be held responsible for any such action.

Place:

Student Signature

Parent/Guardian Signature

Date:

Name:

Name: