

KERALA UNIVERSITY OF FISHERIES & OCEAN STUDIES
PANANGAD, KOCHI-682 506, KERALA
**COVID 19 PANDEMIC - SELF DECLARATION & UNDERTAKING BY THE STUDENT
& GUARDIAN**

Date:

Respected Sir / Madam,

I (Name & Reg. No.....), want to return from (place with state).....
(Mobile number.....), on / / 2021 for attending offline classes.

After return to KUFOS, Kochi, I will reside at the following address
.....
.....

I hereby declare that,

1. I will produce periodic COVID negative certificate (Antigen test) not before 72 hours to the University authorities for the safety reasons.
2. I wish to return to KUFOS, Kochi campus and stay in the hostel for attending contact classes/practical and examinations as scheduled and arranged by the University
3. I also want to declare that any Teacher /University officers have not put any pressure on me to rejoin the academic programmes at KUFOS, Kochi.
4. I am not having fever, cough and breathing problem (from last 2weeks).
None of my family members, is suffering from fever, cough and breathing problem past 2weeks.
5. I am not having any heart, lung or kidney related problem.
6. I will use face mask as well as any other prescribed protective gear and maintain social distancing in my class room/ Laboratories/ academic area/ hostels and in the campus.
7. I will regularly wash hands with soap and water for at least 40 seconds or clean with alcohol based sanitizer.
8. I will self-monitor my health for 14 days. In case, I develop fever, cough and breathing problem then I will inform about it to my Parents/Guardian/ Teacher / officer in charge/ Warden/ Head of department, School Director, etc. Also I will consult a doctor and follow medical advice.
9. I understand that there is always a possibility of getting infected by the virus due to the number of cases in Ernakulum, Kerala State and in the country. I and my parents/ guardians are fully aware of the above fact. At any circumstances my parents will taken back me to the hospital as per the direction of the Health department/University/School Director/Teacher/HoD.
10. I shall bring my own masks and sanitizer for personal use.
11. I understand that in the hostel I have to share common washrooms, and dining facility, etc. I shall take necessary care all the time by diligently following all instructions/notices/protocols in the hostel.
12. I agree to clean the shared bathrooms and toilets before and after their use as per hostel protocols in order to protect myself and others.
13. I also understand that in case of other medical emergency and in case of COVID 19 infection, I may require hospitalization outside the campus for which Government laid down protocols and costs apply.
14. I would stay in the hostel till the completion of the programme as determined by the University. In the event of staying away from the hostel, I would produce Covid negative Certificate for recently to the hostel.

Signature of student:.....

Name of student:.....
Student Reg.No:.....
Course & Batch:.....
Department/School:.....
Date of Joining:..... Student Hostel and Room No:.....
Contact Mobile numbers:-
Emergency contact number 1:
Emergency contact number 2:.....

I shall make possible at my level best for the well-being of my son/daughter in case of any COVID related emergency. In case of hospitalization of the student, needed, I shall take him to my residence/or Hospitals at my own risk in all possible ways for the well being of the other students.

Signature of Parent/Guardian:.....

Name of Parent/Guardian::.....

I shall coordinate the well-being of the Student with the help of available facilities in case of any COVID related emergency. In case of out of campus hospitalization of the student, if necessary, I shall coordinate with the University in all possible ways for the well being of the students including hospitalization.

Teacher/HOD/Director

Asst. Warden/Matron/Hostel Manager.