

## Maharaja Agrasen College University of Delhi

December 3, 2021

## **Notice**

As all are aware UGC/University of Delhi has been issuing advisories for the role to be played by HE Community in tackling the Covid-19 Pandemic. It is a cause of great worry that we are confronted with rise of the pandemic. To address the situation, Heads of Institutions, Faculty members and staff were requested to spread awareness about COVID appropriate behaviors through websites and other media as given below:

1. Always cover mouth with a mask

2. Wash hand frequently and thoroughly with soap and water

3. Do not touch eyes, nose and mouth

4. Maintain a social distancing

5. Avoid large gathering

6. Any body with signs and symptom (cough, fever or difficulty in breathing) should call National Toll Free Helpline Number 1075 or other helpline number.

Since the threat of COVID is not gone, therefore, all concerned are advised to follow COVID appropriate behaviors

The students who visit the college for any official purpose or engagement are required to submit an undertaking duly signed by their parent with college Head Security Guard and obtain a visiting pass.

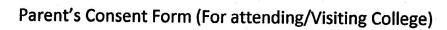
All TICs / Committee Conveners are requested for a coordinated effort and take collective responsibility for spreading awareness about COVID appropriate behaviour

Professor Sanjeev Kumar Tiwari

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Principal (Officiating)

939 112 712 2021



Reason to send the ward in the college (Please specify)

To,
Principal
Maharaja Agrasen College
University of Delhi
Delhi - 110007

Subject: - Consent regarding attending of College by my ward.

with reference to the subject mentioned ab	ove, I
Father/Mother/ Guardian of	(Name of the student),
class/sec, Admission no / Roll N	I am here by placed
to give my consent and allow my ward to atten	d the activities. I will send my ward to the
College / Institute wearing a mask and sensitize	ze him/ her to maintain social distancing
sanitize his/her hands from time to time, follow	COVID Appropriate Behavior (CAB) not
to stationary Items, Tiffin Boxes Etc. I will als	so ensure that I will not send my ward to
College/ Institute incase my ward or anyone in	the family is suffering from COVID 10
Symptoms. I am giving an informed consent to	send my ward to the College in the symmet
situation of the pandemic. I understand that the	novel Coronavirus (COVID 10) has been
declared a global pandemic by the DDMA and the	he World Health Organization (WIIO) and
the country is still not completely free of the vir	Is I further understand that COVID 10:
extremely contagious and may be contracted if	from various sources. I will not hold the
College or the College authorities responsible in	case the child is infected from a known and
an unknown source.	ouse the child is injected from a known or
Name and Signature of Parent / Guardian	
(Please attach Adhar card for records)	
Mobile No.	
	<del></del>
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Area of residence:	is vour area a containment
Area of residence:YES / NO	is your area a containment zone
	is your area a containment zone



## Maharaja Agrasen College University of Delhi

## Students/Visitor Pass

	Security personnel has seen the undertaking from Mr./Ms who wish to visit
department for official purpose.	
Undertaking is being attached he any time during the visit of students	ere with the visitor pass. Any official can check the pass lent.
Date and time of visit	r
	Name and Signature of Security
GRAIN A	Maharaja Agrasen College University of Delh
	Students/Visitor Pass
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Name and Signature of Security