

Ref. No: CMRTC/C-15/CIR/2020-21/006

Date: 02/11/2020

CIRCULAR

In view of the forthcoming regular examinations scheduled from **12th November 2020**, students who are members of CMRTC Girls Hostel and wish to avail Hostel facility are required to produce Covid-19 test report as negative, which should be taken two days prior to the starting of their exams.

Further, they need to submit an undertaking for the same duly signed by Student and Parent, otherwise student will not be allowed to hostel.

Armeddy
02.11.20
Director

To:

➤ **HODs:** for information

CIVIL	MECH	ECE	CSE & IT	H&S	MBA	LIBRARY	EXAM CELL	T&P	ADMIN	IQAC
<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>		<i>[Signature]</i>		<i>[Signature]</i>	

Copy to:

➤ **The Deans:** for information

ACADEMICS	R&D	SWF

➤ **Chairman** for information please.

→ CMR HOSTEL

[Signature]
2/11/2020
[Signature]

Self-Declaration Form Regarding COVID – 19
for Staying in CMR Hostel During Nov-2020 Regular Examinations

1. **Name of the Student:** _____ **Hostel Number:** _____

2. **Roll Number:** _____ **Branch / Year /Semester:** _____ / _____ / _____

3. **Address for communication:** _____

4. I, _____, S /o, D/o _____ hereby
declare as follows:

I HAVE NOT:

- a) been tested positive or presumptively positive for COVID19.
 - b) experiencing any symptoms commonly associated with the COVID19 such as Fever, Cough. Shortness of breath, Runny nose, Headache, Sore throat, etc.,
 - c) been to any location designated as hazardous and/or potentially infected with the Coronavirus by a recognized health or regulatory authority,
 - d) visited a country in the last 6 months for which the Centre for Disease Control and Prevention (“CDC”) had issued a Level 3 Travel Advisory for COVID19
5. I AGREE to notify CMRTC immediately of any change in my health status, including diagnosis with Coronavirus and/or quarantine, if any,
6. I WILL always wear a mask and I consent to having my temperature recorded by any representative of CMRTC at all times while in college premises. I undertake to wash my hands or use sanitiser as mandated by CMRTC. I will also provide any follow up information pertaining to COVID19 requested by the college authorities.
7. The College/Hostel authorities will not be held responsible if I am contacted with Covid 19 virus during my stay in the hostel.
8. I agree to abide by regulations of COVID-19.

Signature of Parent

Name:

Contact No:

Signature of student

Name:

Contact No: