

Govt. of Assam



OFFICE OF THE PRINCIPAL  
**KOKRAJHAR GOVT. COLLEGE**

P.O. & T.O. KOKRAJHAR.  
Dist. KOKRAJHAR, BTC (ASSAM).

From: Dr. Banabina Brahma,  
Principal,  
Kokrajhar Govt. College, Kokrajhar.

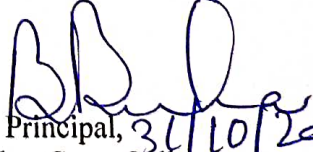
Phone: 03661-270245(O),  
Website: www.kgc.edu.in  
Email ID: principalkokgc@gmail.com

Date: 31/10/2020

**NOTICE:**

It is hereby notified for information to all Students of Kokrajhar Govt. College that as per SOP of the Govt. of Assam, No. ASE.01/2020/Pt.-III/30 Dated, 30<sup>th</sup> October, 2020, the following guidelines has to be followed while coming to college for classes:

1. Students should come to the College with **No Objection Certificate from their parents / guardians** and as such written undertaking / confirmation from the **parents / guardians** should be produced in the College. The format of undertaking is uploaded in the College website: [www.kgc.edu.in](http://www.kgc.edu.in). Students should take print out of the format and get it signed from their parents for onward submission at the College.
2. Parents should ensure that their ward goes to College wearing a mask and sensitize them and also not to exchange mask with others.
3. Parents should not send their children / ward to College, if the child is not feeling well / sick.
4. Attendance is not compulsory and entirely depends on parental consent.

  
Principal, 31/10/2020  
Kokrajhar Govt. College,  
Kokrajhar  
**Kokrajhar Govt. College**  
Kokrajhar

**CONSENT FORM**

(Partial resumption in activities in schools for the students of class 9<sup>th</sup> to 12<sup>th</sup> on a voluntary basis for taking guidance and counselling from the teachers.)

To,  
The Principal/ Head Master

.....  
.....  
(Name of the school)

**CONSENT**

I/we, Smtl ..... , mother

And/Or

Sri ..... , father having residential address  
at.....

....., being the legal guardian  
and parents of ..... (Name of the student) studying in  
class..... Section ..... having Roll No.....

In .....  
(Name of the school) ..... of ..... the

.... (address of the school) , hereby give my/our consent to allow my school going son/daughter to attend the partial resumption in activities in schools for the students of class 9<sup>th</sup> to 12<sup>th</sup> w.e.f 21<sup>st</sup> September, 2020, on a voluntary basis for taking guidance and counselling from the teachers.

I/We, am/are aware of the Covid 19 pandemic and its symptomatic & safety protocols and assure that my son/daughter will obey and observe all the Covid-19 safety protocols as per the instructions of the school authorities and Health authorities, based on the guidelines issued vide Order No.AŞE.01/2020/Pt-II/18 dated, Dispur the 16<sup>th</sup> September, 2020 and Order No.AŞE.01/2020/Pt-II/19 dated, Dispur the 18<sup>th</sup> September, 2020.

*The above information is true to my knowledge and I shall be liable for punishment or penal action as per Rules if the information furnished by me is found to be false or fabricated in any nature at any point of time.*

Full Signature of Mother \_\_\_\_\_

And/Or

Full signature of Father \_\_\_\_\_

Contact Number if any : \_\_\_\_\_

**N.B. : 1. One Consent Form for one student. 2. Signature of both Mother and Father preferable however either of the signature shall also be acceptable. 3. Residential should match the admission Form address. 4. This is a purely**

**UNDERTAKING FOR ATTENDING REGULAR CLASSES**

**UNDERTAKING FROM PARENTS / GUARDIAN**

I Mr. / Ms. .... Father / Mother /  
Legal Guardian of Mr. / Ms. ....  
student of Class..... Stream ..... Roll No.  
..... Contact No..... for the session 2020 – 21 do  
hereby undertake and confirm that I hereby permit my son / daughter / ward to go  
to Kokrajhar Govt. College to attend the regular classes during the COVID – 19  
pandemic and the College authorities will not be responsible if my son / daughter  
contaminate any COVID – 19 symptoms after attending the regular Classes. I do  
hereby confirm that my son / daughter will compulsorily wear face masks within  
the college campus and follow all the COVID – 19 protocols such as hand  
washing, using sanitizers and maintaining social distance.

Signature of Father/Mother/Legal Guardian:

Signature of Student:

Date: