

**Undertaking by students**

(Rs.10 Stamp duty)

I the undersigned Mr./Ms. \_\_\_\_\_ S/o / D/o \_\_\_\_\_, MBBS student of batch \_\_\_\_\_, hereby understand that I am a responsible Medical student and I shall follow all the standard operating procedures (SOPs) for arrest of spread of COVID-19 infection, as advised by Government of India/ State Government. I am willingly coming to attend the classes and stay in the Hostel and shall follow all standard operating procedures (SOPs) and incase I develop COVID-19 infection, I shall be responsible for the same and there would be no liability in part of Institution and its management.

My parents have consented for my joining to the institution (Consent letter from parents attached).

Deponent\_\_\_\_\_

Name: \_\_\_\_\_

MBBS Batch: \_\_\_\_\_

**Consent by Parents/ Guardian**

I the undersigned Mr./Mrs./Ms. \_\_\_\_\_ F/o / M/o / G/o  
\_\_\_\_\_, student of MBBS \_\_\_\_\_ batch of your  
institution, hereby give formal consent for my ward to attend classes and stay in the  
Hostel at your institution. We fully understand the risk involved and there shall be no  
liability of the institution and its management. My ward shall follow all standard  
operating procedures (SOPs) prescribed by local administrative/ State Government/  
Central Government.

Deponent \_\_\_\_\_

Name: \_\_\_\_\_

F/o /M/o/ G/o: \_\_\_\_\_

MBBS Batch: \_\_\_\_\_