

CHAITANYA BHARATHI INSTITUTE OF TECHNOLOGY (A)

Chaitanya Bharathi Post, Kokapet (V), Gandipet (M), Hyderabad-75

Date: _____

UNDERTAKING by PARENT(s)

Name of the student : _____

ROLL. No. : _____

Name of the Parent(s) : _____

We the parent(s) of the above student studying in your college, are aware of the guidelines to be followed by our ward in the context of Covid-19. We will cooperate with the staff and administration of the college / hostel .We take responsibility of the health and safety of our ward during his/her stay in the college / hostel.

This undertaking is submitted on our own and either college staff/administration/hostel warden are not responsible.

Signature(s) of Parent(s):

Name (s):
