VIVEKANAND PUBLIC SCHOOL



B-BLOCK, ANAND VIHAR, DELHI. Ph.: 011-42420545, 9212227153 (Senior Secondary Recognised)

(Affiliated to C.B.S.E)

e-mail: vivekanandschool2008@gmail.com Web: www.vivekanandpublicschool.in

Date: 14/01/2021

All the parents are hereby informed that the school is opening w.e.f. 18 January 2021 for the students of classes X and XII, as per the government notification. The timings for the school will be 9:30 am to 12:30pm.

General Guidelines:

- 1. The students will report to school with the parent's consent only (consent form attached).
- 2. Every student should come masked. He/she should carry 2 extra masks, sanitizer, water bottle, lunch in the school bag along with the study material.
- 3. No sharing of stationary/books/lunch/water bottle will be allowed.
- 4. All the students should observe social distancing.
- 5. The students will sit in their prescribed classroom on the desks which are not marked 'X'.
- 6. The students are not allowed to gather at any place at any point of time in the school premises.
- 7. Lunch break time will be conducted in the class room itself in the presence of the teacher.

The school has adapted the following measures for the health and safety of the students:

- 1. Mandatory temperature check at the school entry gate.
- 2. Different entry gates for class X and XII.
- 3. Compulsory hand sanitization at the entrance of the school, class room, labs., public utility etc.
- 4. No symptomatic child/ staff will be allowed in the school premises.
- 5. Sanitization of the school premises twice a day.

Keeping this in mind, the school authorities request the parents to fill the consent form given below and submit it latest by 15 Jan 2021. A virtual PTM regarding this will also be conducting on 15 Jan 2021. The timing will be intimated to you by respective class teachers.

Soliciting cooperation,

ASHIMA JHAMB

(PRINCIPAL)

CONSENT FORM

l,	, father/ mother of	Of class,
am interested in sending my w	vard to the school w.e.f 18	January 2021 to seek guidance from the
teacher. I assure the school aut	thorities that my ward is phy	sically fit and has no symptoms of Covid-
19.		
Kindly allow my ward to attend	the classes	
Kilidiy allow iliy ward to attend	the classes.	
(Parent's Signature)		
Date:		
Contact No		
Contact No	· • • • • • • • • • • • • • • • • • • •	