



# MOTHER DIVINE PUBLIC SCHOOL

G-31, Sector-3, Rohini, Delhi-110085 | 01143001772-73

Email: [info@motherdivineschool.com](mailto:info@motherdivineschool.com) | URL: [www.motherdivineschool.com](http://www.motherdivineschool.com)

**Consent**

Date: 16.01.21

## Grade X

Dear Parent,

*In view of the directives from the competent authorities and with reference to the School Circular dated 16.01.2021 vide **F.No.MDPS/SS/2020-21/270**, this is to inform you that the school academic classes (practicals/ Projects/Doubts) will be operational in the school for grade X subject to the consent of the parents, w. e. f. 20<sup>th</sup> Jan 2021. Due care will be taken for the effective applications of Covid-19 SOPs.*

*Please endorse your consent for your ward to permit him/her to attend the classes.*

## CONSENT FORM

*I, the Father of/Mother of \_\_\_\_\_ a student of \_\_\_\_\_ class of your school, accord my consent to him/her to visit the school for Practical/Project submission /Doubt sessions w. e. f. 20<sup>th</sup> January 2021.*

*I shall drop my ward at the school and also pick him/her after the classes. Duly signed Authority letter will be submitted to the Class Teacher, if the student travels on his/her own. I also assure that my ward will wear mask, gloves, carry sanitizer or follow any other precaution required to ensure the safety against the disease. Though I am sure the school will take due precautions in the safety and security of my ward, yet I endorse that I shall not hold any member of the school responsible for any untoward happening.*

*I hereby certify that my child is not COVID positive and my child has my consent to attend the school.*

Name and Signature of the father/mother \_\_\_\_\_

Name of the student \_\_\_\_\_

Contact No. \_\_\_\_\_



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Consent

Date: 16.01.21

## Grade XII

Dear Parent,

*In view of the directives from the competent authorities and with reference to the School Circular dated 16.01.2021 vide **F.No.MDPS/SS/2020-21/270**, this is to inform you that the school academic classes (practicals/ Projects/Doubts) will be operational in the school for grade XII subject to the consent of the parents, w. e. f. 20<sup>th</sup> Jan 2021. Due care will be taken for the effective applications of Covid-19 SOPs.*

***Please endorse your consent for your ward to permit him/her to attend the classes.***

## CONSENT FORM

*I, the Father of/Mother of \_\_\_\_\_ a student of \_\_\_\_\_ class of your school, accord my consent to him/her to visit the school for Practical/Project submission /Doubt sessions w. e. f. 20<sup>th</sup> January 2021.*

*I shall drop my ward at the school and also pick him/her after the classes. Duly signed Authority letter will be submitted to the Class Teacher, if the student travels on his/her own. I also assure that my ward will wear mask, gloves, carry sanitizer or follow any other precaution required to ensure the safety against the disease .Though I am sure the school will take due precautions in the safety and security of my ward, yet I endorse that I shall not hold any member of the school responsible for any untoward happening.*

*I hereby certify that my child is not COVID positive and my child has my consent to attend the school.*

Name and Signature of the father/mother \_\_\_\_\_

Name of the student \_\_\_\_\_

Contact No. \_\_\_\_\_