

Date:

Declaration

To
The Registrar,
Vidyasagar University,
Midnapore

Sir,

I do hereby declare that, I shall keep my son / daughter / relative, (name), under strict confinement within my residence for the ensuing 2 weeks, on his / her return. He / She will also be provided a separate room during these two weeks and he / she shall not venture out of his / her room. I also declare to shoulder the full responsibility of my son / daughter / relative during his / her stay as per COVID 19 protocol.

Signature

Designation:

Address: