

Sant Longowal Institute of Engineering & Technology, Longowal

Self-Declaration / Undertaking

(by Ph.D. Scholar returning for Research Work in respective laboratory at SLIET, Longowal)

Respected Sir / Madam,

I S/o/D/o Regn. No. (Mobile Number) have gone through and understood the guidelines and standard operating procedures (SOPs) of the Hostel/Institute, pertaining to resumption of research work. I am aware that it is entirely voluntary for me to return to the Institute and that I am doing so of my own will, having understood the risks inherent in commuting to, and doing laboratory work at the Institute in the current Covid-19 situation.

I am returning from (address where presently staying)

Distt.....State.....Pin.....on .../.../2020.

After return I'll be staying at (address)

.....

I declare that:

1. I shall follow all the guidelines and standard operating procedure (SOPs) of the hostel/institute.
2. I am not having fever, cough and breathing problem from last 2 weeks.
3. None of my family members where I am/was staying presently (address), is suffering from fever, cough and breathing problem past 2 weeks and **it has not been declared as a containment zone**.
4. I am not having any disease like diabetes, hypertension or heart/ lung /kidney related disease, etc.
5. I'll self-monitor my health every day after I rejoin the Institute. In case, I develop fever, cough, flu-like symptoms and/or breathing problem then I'll inform about it to my supervisor / in charge/ Head of department etc. Also I'll consult a doctor and follow medical advice.
6. I understand that there is always a possibility of getting infected by the virus. My parents/ guardians are also fully aware of my wish to return to the campus to start work in the laboratories and other offices for my research related activities.
7. I also want to declare that my supervisor has not put any pressure on me to resume the research activities at SLIET, Longowal.
8. I also understand that SLIET, Longowal has a Primary Health Care Centre only and it will extend all available facilities in case of a medical emergency. However, in case of Covid-19 infection I may require isolation, treatment and/or hospitalization outside the campus, for which government laid down protocols.
9. I will use Aarogya Setu App on my mobile no..... and it will remain active at all times (through Bluetooth and Wi-Fi).

10. I understand that cooperative mess facility has been provided in the hostel and I shall bear all expensive of running mess on actual basis. I will abide by Institute policy in this regard in future.
11. I have cleared all the mess dues and copy of proof of payment with concerned mess contractor is attached herewith for your kind reference. (Receipt No. dated.....)

Dated:.....

Signature of student:

Name of student :

Department:

Name of Supervisor/P.I.:

Mobile number:.....

Emergency contact number 1:..... Relation with contact person:.....

Emergency contact number 2:..... Relation with contact person:.....

Undertaking by Parent(s)

I have read and understood the guidelines and SOPs and I agree to send my ward to resume his/her research activities at SLIET, Longowal without any pressure from his/her supervisor or Institute authority. I further undertake that I shall follow all the instructions/guidelines issued by Institute authority in case, my ward is infected by Covid-19 and fully cooperate with Institute authority.

Dated:.....

Signature of parent:

Name of parent:

Relation with student:

Undertaking by Supervisor/P.I.

I agree with the above request made by the research scholar. I affirm that I have not exerted any pressure in making the research scholar decide to return to the Institute. I shall coordinate the well-being of the research scholar with the help of available Institute facilities in case of any Covid-19 related emergency. Further, I will ensure that the candidate follow Institute / Hostel rules & regulations.

Date:.....

Signature of Supervisor/P.I:

Name of Supervisor/P.I:.....

Signature of the HOD with date.....