

## **MITHILA PUBLIC SCHOOL**

R. B. NAGAR, BHADRESHWAR, FORBESGANJ, ARARIA, BIHAR- 854316 ESTD. 1989 | AFFILIATION NO: 330021 | SCHOOL NO: 65021

## LETTER OF CONSENT

As the Parent/ Guardian of the minor student named below, I, hereby, give my consent and permission for him / her to attend the school for regular classes, in accordance with the Letter no. 2169, dated 24.12.20, of The Department of Education, Bihar.

Furthermore, I understand the potential risks involved and assure that:

- 1. My ward is medically fit.
- 2. My ward will be following all the COVID19 related SOP's and guidelines issued by the school, the MoHFW, the State Government, and other government agencies as applicable.

Student's Name:	Class:
Parent's / Guardian's Name:	

## **Emergency Contact Details**

Name: \_\_\_\_\_\_

Relation to the student: \_\_\_\_\_

Phone number: +91 \_\_\_\_\_

I confirm that all the information furnished above is true to the best of my knowledge.

Date: \_\_\_/\_\_\_/

(Parent's / Guardian's Signature)

Place: \_\_\_\_\_