

PARENT CONSENT LETTER

I BHMS Students

To

**The Principal,
Govt. Homoeopathic Medical College,
Kozhikode**

Sir,

I Parent of studying in **I BHMS 2020Admission** (Class) give my consent for my ward to attend classes abiding all the college rules and the guidelines of KUHS and Government of Kerala regarding the Covid-19 protocol. I understand that the college is taking all the possible precautions as per the Covid-19 protocol and I extend all co-operation for the smooth and safe functioning of college.

1. Hostel inmates of I BHMS will be admitted on 01.03.2021.
2. All inmates shall carry RTPCR Negative Certificate during entry done within 72hrs.
3. All inmates shall follow Covid 19 protocol in the hostel & campus.
4. Inmates shall not be allowed to go out of campus; all necessary items shall be carried individually avoiding sharing.
5. Going home every weekend will not be permitted.
6. Food will be provided in the hostel on all days and outside food (including from Canteen) will not be permitted. (not applicable for Men's Hostel Inmates)
7. Electricity and water bill and other establishment charges will be collected from inmates who are present at that time (not applicable for Men's Hostel Inmates) and shall clear all payments without due.
8. Shall follows social distancing while taking food from mess hall and will not be allowed to eat together in the mess hall. (not applicable for Men's Hostel Inmates)

Food Timing (Ladies Hostel Only)

Breakfast	: 7.30 AM	–	Final Year
	: 7.45AM	-	IInd Year
	: 8.00 AM	–	IIIrd Year
	: 8.30 AM	–	Ist Year
Lunch	: 12.45 PM	–	First Year
	: 1.00 PM	–	Final year
	: 1.15 PM	–	IInd Year
	: 1.30 PM	–	IIIrd Year
Dinner	: 6.30 PM	–	First year
	: 7.00 PM	–	Final year
	: 7.15 PM	–	IInd Year
	: 7.30 PM	–	IIIrd Year

9. No Day scholar/guests will be allowed to enter the hostel premises.

10. Strict action including denial of hostel facilities in case of violation of above rules.

11. If any students develop Covid-19 symptoms, it is the duty of the parent to take them for quarantine/treatment.

I understand all the above rules of the hostel and ensure that my son/daughter shall follow them without any lapse and will also maintain Covid-19 appropriate behaviour in the campus.

Name of Parent:

Name of Student:

Signature:

Signature:

Mobile No:

Place:

Date: