

## BHAVAN'S LLOYDS VIDYA NIKETAN, WARDHA

## **DECLARATION**

Date: / /
1. Student's Full Name:
2. Academic Year 2021-22 Class: Section:
3. Full Name of Parent:
4. Present Residential Address:
5. Parent's Mobile Number (Calling/Whatsapp) :
Parent's Responsibility:-
<ul> <li>Child should be wearing mask and carry personal water bottle and handkerchief.</li> <li>Habit of not touching the mouth &amp; wearing mask has been inculcated.</li> <li>Habit of cleaning hands regularly by soap is developed.</li> <li>Child should not be sent to the school if he / she is sick.</li> <li>This duly filled Declaration along with Consent to be mailed on blvn47@rediffmail.com. by 10<sup>th</sup> Nov. 2021.</li> <li>A copy of the same is to be sent to class teachers through Whatsapp.</li> </ul>
Parent's Name :
Student's Sign: Parent's Sign: