## **DECLARATION**

## To be submitted by the Student at the time of rejoining the Hostel, College of Engineering Trivandrum, for Contact Classes

College of Engineering Trivandrum, for Contact Classes		
Ι, _	, student of	
		(Department / Semester)
he	ereby declare that	
	I will wear mask, maintain social distancing norm the Government of Kerala, the University, the Co this contact class period and also outside office h I am aware that anyone - staff / student can be a	llege and Hostel authorities during nours / college timing. n asymptomatic carrier of COVID-19
	and will take all precautions and maintain discipli I was not in contact with any COVID-19 positive family is COVID-19 positive.	
•	I do not come from a Containment Zone.	
•	I do not suffer from any of the following symptom • fever (feeling hot to the touch, a temperature of • new onset of cough (continuous, more than usu	37.8 degrees Celsius or higher)
	<ul> <li>difficulty breathing or shortness of breath (out o</li> </ul>	
	<ul><li>sore throat or difficulty swallowing</li><li>hoarse voice (more rough or harsh than normal</li></ul>	)
	• chills	,
	• runny, stuffy or congested nose	
	<ul><li>lost sense of taste or smell</li><li>persistent headache</li></ul>	
	digestive issues (nausea/vomiting, diarrhea, stomach pain)	
	fatigue (lack of energy, extreme tiredness)	
•	<ul> <li>falling down more than usual</li> <li>If I come in contact with a positive COVID case, or symptom, I will immediately report to the Hostel and the contact with a positive COVID case, or symptom.</li> </ul>	
•	I shall not leave the hostel for non-academic reas	sons and I shall duly enter all entry
•	and exit from the hostel in the movement register I hereby state that I will not in any way disturb/tar students kept in the hostel and in the room allotte	mper/or take the belongings of other
•	responsibility in this matter. I hereby state that <u>I shall compulsorily vacate the room allotted to me by 16<sup>th</sup> January 2020 evening and shall plan my return journey accordingly in advance.</u>	
	shall abide by all rules enforced by the Hostel Autho	rities during my stay here from 4 <sup>th</sup> to
Signature of Student		Signature of Parent
Date :		Date :
Name :		Name :
Semester & Department:		Mobile Number :

Address:

Mobile Number: