CONFIRMATION LETTER – REOPENING SCHOOL

Dear Parents,

Greeting from Puna International School !!!!

With the efforts of the Department of Education and the cooperation of all of you, the educational work of the students has been successfully done online till date. – Through virtual classrooms, home learning.

But now, as the government has given the guidelines to **reopen the schools from 15- Dec-2021** (Wednesday).

School's Responsibilities: -

- 1) We ensure you that whole school building is fully sanitized on regular basis.
- 2) We have maintain the cleanliness all around in the campus.
- 3) We have made the necessary arrangements in the class to maintain the social distancing among the students.
- 4) No food will be provided by the school.
- 5) No gathering is allowed at one place.
- 6) Prayers and assembly at specific place.
- 7) If any students is sick or having any medical difficulties, we request the students family not to send their ward. We will not insist on the attendance.

Student's Responsibilities: -

- 1) Students have to wear the mask, gloves in the school during school hours.
- 2) No packed food or snacks in allowed.
- 3) Maintain social distancing in the class and in the school premises.
- 4) Thermal screening is compulsory for the students.
- 5) Maintain the cleanliness all around.
- 6) Students have to bring their own water bottle.

DECLARATION DETAILS
To, The Principal, PUNA INTERNATIONAL SCHOOL, (Swaminarayan Gurukul, Zundal) Opp. Zundal Village, Zundal Gandhinagar, Gujarat
Dear Sir / Madam,
I the parent / guardian of
who is studying in Grade Stream and we confirm our residential address as below:
As per the latest guidelines issued by the Govt. of Gujarat we hereby declare as under: • I hereby declare that my ward will attend physical school. • I declare that my ward is not exhibiting any symptom of COVID-19 • I declare that my ward will follow all safety & hygiene guidelines. I declare the above consent provided is provided voluntarily and that I will not hold the school accountable in the event of any unforeseen incident. Name of Parent: Contact Number: 1)
: Approved By:
Principal Name :
Date : Signature :

