

होटल प्रबन्ध व्यवस्था भोजन भण्डार एवं पौषाहार संस्थान, गुरदासपुर
INSTITUTE OF HOTEL MANAGEMENT CATERING & NUTRITION

Ref No. IHM(G)/ 2237

Dated : 9/9/2021

NOTICE

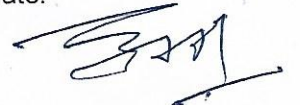
All the desirous students of **5th Semester** (2021-22) are hereby informed that keeping in view the recent guidelines of Punjab Government, the Institute will resume to conduct offline practical classes in the Institute campus from 20th September, 2021 onwards and the theory classes in online mode will continue as per existing time table, subject to the following :-

- (i) Fully Vaccinated, or COVID recovered students shall only be allowed to be physically present in the Institute as per Punjab Government guidelines. Students are required to report physically with all original supporting certificates in this regard and undertaking/self declaration which includes the written consent of their parent. They are advised to send us copy of all the aforesaid documents through the google form (link <https://forms.gle/g5d3HxKZpHJZEKSWA>) by 17th September, 2021 so as to avoid any inconvenience while reporting physically to the institute.
- (ii) This decision with regard to physical reporting by students to the Institute is subject to amendment anytime based on the guidelines of the Government / or for any other reason as deemed fit by the Institute.
- (iv) Students are required to follow in the campus all the guidelines/precautionary advice in the campus as issued by the State / Central Govt. and local administration from time to time.

Students are advised to carry their personal sanitization kit (as per Covid-19 protocol) and in case of hostel requirement, students are required to send the request on the following email ids by 15th September, 2021 :-

Boys Hostel Warden : warden2.ihmgsp@gmail.com
Girls Hostel Warden : warden3.ihmgsp@gmail.com

Note - Students are advised to visit the Institute's website regularly for any update.



Academic coordinator

Copy To:

1. Principal for information.
2. Student Notice Board/Institute web site.
3. All Concerned for necessary action please.
2. All Faculty and Staff

UNDERTAKING/SELF DECLARATION

To

The IHM Gurdaspur.

I have gone through and understood the COVID-19 guidelines and protocols, pertaining to commencement of physical classes in the Institute. I state that I am aware that it is entirely voluntary for me to come to the Institute and that I am doing so of my own free will having understood the risks inherent in commuting to and attending classes at the Institute in the current Covid-19 Pandemic.

I understand that if I am found to have given wrong information in the declaration below or not following precautionary advisory issued/ will be issued after on reaching at the institute I will be liable for disciplinary action and will not be allowed to attend classes.

I declare that

- ✓ I will wear face mask as well as any other prescribed protective gear and maintain physical social distancing in my class room/ Practical Labs/ academic areal/hostels and in Institute campus
- ✓ I will self-monitor my health every day after I return to the Institute. In case, I develop fever, cough, flu-like symptoms and/or breathing problem then I will inform about it to my Class teacher /Warden.
- ✓ I understand that there is always a possibility of getting infected by the virus. My parents are also fully aware of my wish to return to the campus.
- ✓ However in case of COVID-19 infection I may require isolation, treatment and/or hospitalization outside the campus, for which government laid down protocols and costs apply. It is highly possible that for Covid positive cases, State/Central Govt and local administration may insist on shifting to designated isolation facility.
- ✓ No leave/weekend leave will normally be considered during period of physical classes.
- ✓ I declare that without prior approval, I will not leave the college campus in any case.

Name of student :

Signature :

Contact Mobile number:

I do hereby give my consent to allow my ward as per the undertaking / self declaration made given by him.

Name of Parent :

Contact number of parent/Guardian:-

Dated : _____

(Signature of Parent)