



Bal Bharati
PUBLIC SCHOOL

BBPSRH/PARENT/2021-22/90

9th November 2021

Reopening of School for Classes VI- VIII

Dear Parents,

With reference to the DDMA order no. F.60/DDMA/COVID-19/2021/487 dated 29.10.2021, the school shall reopen for students of classes VI- VIII from 11th November 2021. The classes, in the blended mode, will be conducted from 9:00 a.m. to 11:30 a.m. on all teaching days. The focus will be on mindfulness, coping with stress and anxiety and experiential learning.

The School seeks your consent for sending your ward to school. Students must bring the photocopies of Annexure A (Consent for attending offline classes) and Annexure C (Self Declaration Form) duly signed by the parents and submit the same to their teacher on the first day of offline classes.

The seating plan for the conduct of classes is as follows:

Class	Venue (New Block)
VI	Ground Floor
VII	First Floor
VIII	Second Floor

The reopening is in complete compliance with the guidelines given by the Delhi government and Covid Safety Measures will be followed at all levels of commencement of offline classes. Students must follow the Do's and Don'ts issued in the Annexure B.

The Time Table and the seating arrangement with a maximum of 20 students in each class will be shared by the Class Teachers on the class group soon.

We look forward to your cooperation in making this endeavour a success.

GEETA GANGWANI
PRINCIPAL



PARENT'S CONSENT FORM
(For Attending School)

Subject: Consent regarding attending of school by my ward

With reference to the subject mentioned above, I _____
F/M/Guardian/Of _____(Name of the student), Class/Sec _____,
Roll No. _____, am hereby pleased to give my consent and allow my ward to attend the
school physically for classes and related activities. I will send my ward to the school wearing a
mask and sensitize him/her to maintain social distancing, to sanitize his/her hands from time
to time, to follow COVID Appropriate Behaviour (CAB), not to share books, note-books,
stationery items, tiffin box, etc.,

I will also ensure that I shall not send my ward to school in case my ward or anyone in the
family is suffereing from COVID-19 symptoms.

Signature of Parent/Guardian

Date:



SAFE REOPENING OF SCHOOL

DO'S & DON'TS FOR STUDENTS

Dear students,

As we welcome you back to the school, we assure you that the school authorities are making all efforts to provide a safe and hygienic environment to the students within the school premises. However it is expected that students should also follow all the guidelines given to them and cooperate with the school to keep themselves and others safe. Please observe the following guidelines while you come to school -

DO'S

1. **Report to school as per schedule shared and in proper school uniform.** Be punctual & regular.
2. **Submit self-declaration for Medical Fitness** when you come to school on the first day.
Entry to school premises will be prohibited without the self- declaration form.
3. **Check your temperature** before coming to the school. If the temperature is greater than normal, you should stay at home.
4. **Stay at home** if you are suffering from ailments like seasonal flu, respiratory symptoms, or any other vulnerability.
5. **Maintain social distancing by keeping proper distance (2 meters / 6 feet) at all times. Follow the social distancing markings that have been put on the floor, on the furniture, in labs and in the washrooms.**
6. **Inform the support staff** deputed outside the washroom in case the soap solution has been consumed and the bottle is empty or if there is any other reporting matter. The same should also be informed to the teacher on duty.

7. **Wear a mask** while commuting to school and during the school hours. Carry one extra mask every day.
8. While in school, **follow the instructions** given by the teachers and the maintenance staff
9. **Carry hand sanitizer** to school every day & use it especially when you:-
 - * enter the school
 - * use the washroom
 - * have lunch (hands to be washed preferably with soap and water)
 - * hands are visibly dirty
 - * sneeze or cough in hands
 - * touch any surface that has a high probability of being touched by others.(railings, door knobs, handles etc.).
10. **Carry two clean cloth towels or** disposable paper towels to dry hands and/or wipe surface.
11. **Carry lunch and a water bottle.**
12. **Follow proper etiquettes while sneezing and coughing**
13. **Strictly adhere to the seating plan** in the classroom
14. **Remain in the classroom** during the stay in school including the recess time.
15. **Follow a hygiene routine** once you reach back home like, sanitizing their school bag & belongings, taking bath immediately, washing mask (if reusable)
16. In case of any emergency, **contact your teacher** for support.

DON'TS

1. Students **should not leave** their allotted classroom and allotted seat even during recess.
2. Students **should not share** their water bottle, lunch, stationary, books & notebooks etc with other students.
3. **Unnecessary movement** in the corridors and gathering must be avoided.

4. While using the washroom, students should be careful not **to stay unnecessarily longer** in the washroom.
5. **Crowding must be avoided at water coolers, in corridors, at entry & exit** gates by following the social distancing markings.
6. **Do not touch your face-** eyes, nose and ears.
7. **Do not carry any extra study material** other than what is required as per the timetable.
8. **Avoid hugging &handshakes** with friends.
9. **Always Remember To Avoid The Three C's :**
 - Confined Spaces
 - Crowded Places
 - Close Contacts

Stay Safe! Stay Healthy!

Team BBPS, Rohini

**Personal Details**

Name of Student	
Class & Section	
Admission No.	
Father's Name	
Contact No.	

Self-Declaration Form related to Covid-19

Has your ward had this symptoms in the last month?	Response	If Yes, Give reason and Current Status
Fever	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Cough	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Runny Nose	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Sore throat	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Lost sense of smell and / or taste	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Breathing Difficulty	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Have your ward or any family member tested positive for COVID-19 at any time in the last one month/30 days	<input type="checkbox"/> Yes <input type="checkbox"/> No	

I hereby declare that the information provided above given by me regarding my ward is true to my knowledge and I have not misrepresented any information.

Undertaking

My ward has my due permission and consent to attend offline classes within the school campus. I assure that my ward will follow all the safety protocols and hygiene measures, within and outside the school campus.

Signature of the Parent (Father and Mother)

Date: