



Deed of Undertaking

I, **ROMULOS AMISTAD II W.**, of legal age, do hereby freely, and voluntarily declare that:

1. I was offered by the School of Information Technology the option to complete the face-to-face on-the-job training whenever possible.
2. I was advised to consider face-to-face on-the-job training in the **Second Semester 2021 - 2022** whenever possible without prejudice to readmission and maximum residency, especially if I am living with individual(s) with significant co-morbidities, children, and older persons of the risk of contracting COVID-19.
3. Despite of the option to defer my face-to-face learning, I have elected to participate in the on-the-job training conducted onsite at **University of Baguio Registrar**.
I understand that:
 - a. By participating in the training, I may be involved in direct contact with individuals present at the facility.
 - b. While I will not be allowed to roam around and mingle with other workers, I am aware that the danger of getting infected in the company is ever present.
 - c. COVID-19 is highly contagious and can be spread from person-to-person through droplets, aerosols, and potentially through contaminated surfaces and fomites.
 - d. Symptoms typically include fever, cough, respiratory distress/shortness of breath, and may include sore throat, headache, muscle aches, gastrointestinal symptoms, and unusual rashes.
4. I will abide by the safety protocols set in place by School of Information Technology, the company, the IATF, and the local government and further agree that:
 - a. I will only participate in the training if I am symptom free.
 - b. While inside the company, I shall wear the necessary Personal Protective Equipment (PPE) as agreed upon by the company and my institution, as well as the acceptable dress code when going to, entering, and leaving the company.
 - c. I will consistently practice all health and safety protocols to protect myself, my co-trainees/workers and all my personal contacts.
 - d. I will inform my instructor(s) if my commute or other activities put me in close contact with others who have been found to be COVID positive.
 - e. I will inform my instructors and will not participate in the training if a resident in my home tests positive for COVID.
5. I am aware that if I have tested positive for COVID, the company or the School of Information Technology may be required to notify local health authorities that I am undergoing clinical training in their facility and may be required to divulge information necessary for data collection and contact tracing. My signature in this form constitutes my consent for such information to be released.

Amistad, Romulos II W.			3 Feb 2022
Students Name (Family Name, Middle Name Initial, Given Name)		Signature	Date
Amistad, Romulos M.			13 Feb 2022
Parents/Guardian Name (Family Name, Middle Name Initial, Given Name)		Signature	Date
Cherry Ann Carpiso	School of Information Technology	OJT Adviser	2 Feb 2022
Name	School	Position	Date
MEDARDO ABARIENTOS	University of Baguio	REGISTRAR	2/14/2022
Name	Institution / Company	Position	Date