

CONSENT BY PARENTS

I, parent of Mr./Ms.(student name),
registration no., hereby provide my consent for my son/daughter to attend the offline
classes in Lovely Professional University.

I undertake that my son/daughter is fully vaccinated and has received both the doses of vaccine and he/she
has also uploaded the details regarding the same (final vaccination certificate) at the University portal.

I shall also ensure that my ward strictly adheres to the guidelines and instructions issued by the University
from time-to-time.

Further in case, he/she gets affected by COVID-19 during his/her stay at the University campus in this
period, I shall be entirely responsible for the same.

I am also aware that the travel bookings or arrangements for my ward's travel from his/her hometown to
the University should only be made after he/she receives the confirmation message of registration and exact date
for offline reporting in the University in his/her UMS My Messages.

I also understand that in case of any kind of medical emergency or if the pandemic situation becomes
serious in future and the government/regulatory bodies issue guidelines for temporary closing of
University/withdrawal of offline classes, then I shall be solely responsible for making the travel/transportation
arrangements for my ward for return to his/her hometown as necessary.

Signature of the Parent

Name of the Parent (In Capital Letters)

Date:

Location: