

DAV PUBLIC SCHOOLS, PPL, PARADEEP

Ref.No.PP/NOTICE/012/2021

Date:-04/02/21

REOPENING OF SCHOOL FOR CLASS IX & XI

Dear Parents,

Greetings of the day !

Hope you are safe and healthy

In accordance with the guidelines dated 01/02/21 issued by the School & Mass Education Department, Govt. of Odisha the school management is going to reopen the school for classes IX & XI of English Medium and IX of Odia Medium w.e.f. 08/02/21 strictly following the SOP of Covid-19. The guidelines issued by the Govt. titled “**Odisha School Reopening Plan**” is posted in the school website for reference of the parents. As per the guidelines issued by the Govt., parents are required to give their written consent for sending their children to the school for attending the offline classes. A sample of the consent form is attached to this notice for reference of the Parents concerned.

In this context the parents interested to send their wards to the school for offline classes are requested to mail the consent form duly filled in and signed by them to the mail ID of the school davppl@yahoo.com on or before 05/02/21. Parents are also requested to drop their wards near the gate of the school and wait till the child enters into the school after thermal scanning. If any student is found having body temperature above 98.6 degree Celsius, the parent concerned is required to take back the child. The school timing will be from 7.45a.m. to 10.00a.m.

The parents have liberty to verify the arrangements made by the school for reopening of the school as per the SOP of Covid-19 by 05/02/21. However, as per the guidelines of the Govt., the school management has constituted a Covid Monitoring Team comprising of one parent member of SMC, one parent of former PTCC, and one Teacher who will ensure full cleanliness/sanitization in the school every day, before and after the classes. The Team members are **Mrs. Tanuja Biswal-Mob.7008955925**, **Mr. Subrat Kumar Mohapatra-Mob.7873990329**, **Mr. Brundabana Rout-Mob.9938377510**, **Mrs. Rajashree Mohapatra-8249325144**. Please inform, if you face any problem regarding the SOP to be followed by the school.

On the reopening of the school the students are required to :

- Wear face mask without fail while coming to the school and carry an additional mask.
- Bring the hard copy of the Consent form to be handed over to the Class teacher.
- Move into the school on the circles marked on the road/floor only, maintaining social distancing.
- Produce the school Diary to the person at the gate for noting the body temperature during the thermal scanning every day.
- Sanitize hands near the Gate before entering into the classroom and also beginning of each period.
- Occupy their allotted seat only, after entering into the class room.
- Not move here and there, either in the class room or in the school premises during the school hour.
- Maintain social distancing and use sanitizer/hand wash before and after going to toilet only during the interval between each period.
- Inform the concerned Supervisory Head, in case they misplace the mask during school hours.
- Carry home made tiffin only.
- Not to share Tiffin, Water bottle, Book, Notebook, Pen, Pencil or any other belongings with their friends.
- Dispose off the disposable masks, if any, in the designated dustbin.
- Leave the vicinity of the school immediately after completion of the classes in staggered manner to avoid crowd/gathering near the school area.

Expecting your full cooperation.

Sincerely yours,


4.2.2024
PRINCIPAL

DAV PUBLIC SCHOOL,PPL,PARADEEP

PARENTS CONSENT FORM

I, Mr/Mrs. _____ (father/mother) of Master/Miss _____ of Std. IX/XI bearing School Admission number _____ /Class Roll Number _____ do hereby declare that I am fully satisfied with the provisions made by the school for reopening of the school w.e.f. 08/02/2021.

I whole heartedly give my consent to send my child for attending the offline classes w.e.f. 08/02/21 on the school premises.

I do hereby undertake that I will ensure not to send my child if he/she suffers from cold/cough/fever or any other symptoms of COVID or other viral infections. I/We will enforce wearing of mask as well as use of pocket hand sanitizer by my child.

Full Signature of Parents with date

Mob. No.

E-mail: