

Dispatch No. GGSIPU/USLLS/2021/9062
Date 21/09/2021

UNIVERSITY SCHOOL OF LAW AND LEGAL STUDIES
GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY
Sec-16 C, Dwarka Campus, New Delhi-78

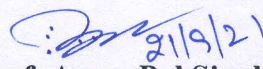
F.No. GGSIPU/ Student Notice/ USLLS/2021 /9062

Dated: 21 -09-2021

STUDENT NOTICE

Sub: Commencement of physical (Off-Line) Classes

In view of the latest guidelines of DDMA and Govt. of Delhi relating to opening up of educational institution, University School of Law and Legal Studies, Guru Gobind Singh Indraprastha University, Sector-16 C, Dwarka, New Delhi-110078 is likely to commence physical (Off-Line) classes in University Campus in phased manner. In the first phase, the USLLS is proposing to commence classes for the PG Courses and the final year of B.A.LL.B/B.B.A.LL.B. One of the conditions stipulated in DDMA/GNCTD guidelines is that students should obtain consent of their parents for attending physical (off-Line) classes. B.A.LL.B/B.B.A.LL.B. 9th semester are hereby directed to consult their parents and obtain their consent for attending physical (off-line) classes. The prescribed proforma is enclosed with the notice. The Students are expected to fill in the proforma, duly signed by their parents, and submit a scanned copy of the same to uslls_ipuniversity@yahoo.com, latest by 30th September 2021.


(Prof. Amar Pal Singh)
Dean, USLLS
21-9-2021

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Annexure - 1

**Parent's Consent Form
(For Attending School / Institute)**

To
The Head of School / Institute
Name of the School/ Institute

Subject: Consent regarding attending of School / Institute by my ward.

With reference to the subject mentioned above, I _____, Father/
Mother / Guardian of _____ (Name of the student),
Class/Sec. _____, Roll No. _____ Student ID. _____ am
hereby pleased to give my consent and allow my ward to attend the school / institute for
classes and related activities. I will send my ward to the school / institute wearing a mask and
sensitize him / her to maintain social distancing, sanitize his / her hands from time to time, follow
COVID Appropriate Behavior (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 / institute in case my ward or anyone
in the family is suffering from COVID-19 symptoms.

Date: _____

Place: _____

Signature of Parent / Guardian _____

Parent / Guardian's Name _____

Student Name _____

Address _____

Mob.No. _____

~~Signature~~
Addl CEO