केरल केन्द्रीय विश्वविद्यालय
CENTRAL UNIVERSITY OF KERALA
(*Established under the Act of Parliament in 2009*)
Tejaswini Hills, Periye PO, Kasragod -671 320

PARENT CONSENT

I, Mr hereby permit my son/daughter Miss/Mr aged , studying in Department of to study in the university/hostel from the date of joining. I understand that my son/daughter/spouse will study in the university by following strict covid19 guidelines.

If any situation arise as to any disease or illness during this period, he /she will be treated as per UGC guidelines (November 2020) and protocol placed by the Central University of Kerala regarding COVID 19. Myself and my son /daughter/spouse will abide the rules of Central university of Kerala in this regard.

DATE SIGNATURE