KENDRIYA VIDYALAYA MAHABUBABAD

CONSENT LETTER.

I __________________________ F/o _________________ studying Class ________ permit my ward to collect the deworming tablet (Albendazole) from School as a part of National Deworming Day initiative of Ministry of Health and Family welfare. I also declare that my ward is not 1 .Allergic 2. Asthmatic 3. Under any other medication

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