

**UNDERTAKING BY HOSTEL RESIDENTS**  
**NAGAON G.N.D.G. COMMERCE COLLEGE**

By signing this form, I declare the following voluntarily:

1. I have done the Covid-19 screening test recently and my result was negative in that test. **(Copy enclosed)**
2. I have not come in contact with anyone with a confirmed COVID-19 diagnosis in the last 14 days.
3. I will report any illness or fever immediately to the Govt. Civil Hospital authority.
4. For any situation, I assure that my Local Guardian will be available to receive the phone call at any urgency.

**Name of the Local Guardian :**

**Address of the Local Guardian:**

**Contact No.:**

5. I agree to pay for all medical expenses in case of my hospitalization in any private Hospital incurred and give permission to the doctor or health care professional to provide medical care, if necessary.
6. I will maintain the social distancing in the Hostel campus and will strictly follow the safety measures.
7. I will not invite any friend or outsider to the Hostel premises.
8. I have re-joined the Hostel with proper permission from my parents/guardians and the College and the authority are not responsible.
9. I will be solely responsible for my health safety and the College authority is not responsible for my stay in the Hostel. The authority is allowed me to stay in the Hostel as per my request.
10. The College authority has the right to deny any Hostel boarder to re-join the Hostel or may ask to vacate the Hostel immediately if my health condition poses an undue health risk to other boarders.

The information I have given in this form is complete and true. I also understand that if I fail to comply with the above terms and conditions, I will be liable for the action as per the decision of the College authority.

**Signature of the Boarder:**

**Name of the Boarder:**

**Date:**

**Name of the Hostel: M.Dekaraja  
Girls Hostel, Nagaon G.N.D.G.  
Commerce College.**

**Signature of the Parents:**

**Room No.:**

**Date:**

**Semester/Department:**

**Contact No. of the Parents:**

**Contact No. of the Boarder :**