



BIRLA SHISHU VIHAR

A Prestigious Day School for Boys and Girls

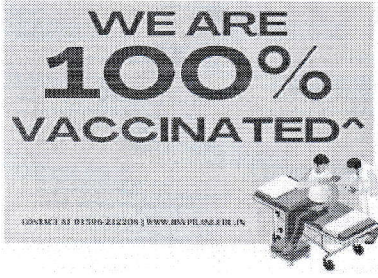
(Affiliated to CBSE, New Delhi No: 1730263, School No: 10606)

(A Birla Education Trust, Pilani Institution)

Website: www.bsvpilani.edu.in

Estd: 1953

February 14, 2022



Dear Parents,

With reference of State Government order, School will resume Onsite classes for students of Nursery - V w.e.f. February 16, 2022.

Working Plan:

- Parents' consent form is necessary for attending the onsite class in school by their ward.
- Please submit the softcopy of consent form by February 15, 2022 on given format to birlashishuvihar2020@gmail.com.

Students must bring a hard copy of Parents' consent form on the day of reporting.

Note:

- Students will report to school in Winter school uniform.
- The student is supposed to follow "Do's and Don'ts"

DO's

1. Use face cover/Mask (Preferably washable cloth mask).
2. Carry his/her alcohol-based hand sanitizer & Handkerchief.
3. Bring own notebooks & stationary items.
4. Bring eatable item and water bottle for self.
5. Follow Physical distancing of at least 6 feet.
6. Cough and sneeze into a tissue or elbow.
7. Self-monitor his/her health and report any illness at the earliest.

DON'Ts

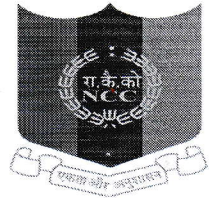
1. Touch his/her face, eyes, nose & mouth frequently.
2. Share anything with anybody (eatables, water bottle & stationary).
3. Stigmatize peers or tease anyone about being sick, remember that the virus doesn't follow geographical boundaries, ethnicity, age, ability or gender.
4. Come to school in overcrowded vehicles.
5. Drink water directly from the tap.

Thanks.

With regards,

Pavan Vashishtha
Principal

14/02/22



VIDYA VIHAR, PILANI – 333031, District: Jhunjhunu, Rajasthan (INDIA)

Tel (+91) 1596 242208, 242195 Email: principal@bsvpilani.edu.in, contactus@bsvpilani.edu.in



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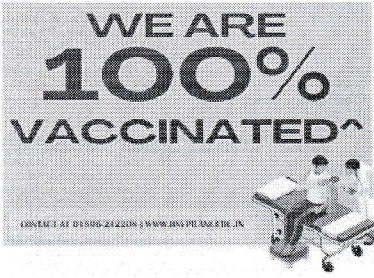
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Re-Opening of School for class Nursery - V w.e.f.
February 16, 2022

Parents' Consent Form

I, _____ F/M/O _____ Scholar No _____ studying in _____ of Birla Shishu Vihar, Pilani would like to furnish the following details.

Emergency Details:

Address _____

Phone No. _____

Medical information:

1. Does your child suffer from any condition requiring medical treatment including medication?
If yes, please specify _____

2. Any case of COVID -19 in the family or neighbourhood in last fourteen/fifteen days.
Please mention _____

I give my consent for _____ of class _____ Sec _____ to attend onsite classes from February 16, 2022.

Pledge: I will not send my child if he / she suffer from Cough, Cold, Sore throat, Fever and any other illness.

School management will not be responsible for any ailment to my ward.

Dated _____ Signature of Parent _____



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