

Reopening of School

Dear Parents

In accordance with the Delhi Government's decision on reopening of schools, the School Management has decided to commence physical classes from Monday, 15 November 2021 for the students of classes I to III with 50% student strength.

The school assures you that all the SOP guidelines issued by the Ministry of Health and Family Welfare with regard to hygiene and sanitization will be strictly adhered to at all levels.

The students must also strictly follow all COVID protocols and guidelines set by the State Government, CBSE and the School. A close and constant check on wearing of masks and proper social distancing will be maintained throughout the school hours.

The students should report in proper winter school uniform and carry books/notebooks (as per timetable), a water bottle and light snacks only. The detailed timetable will be shared shortly.

DICDEDCAL TIME

	REPORTING TIME	DISPERSAL IIME
Class 3:	8:10 am	11:20 am
Class 2:	8:20 am	11:30 am
Class 1:	8:30 am	11: 40 am

DEDODTING TIME

Transportation facility cannot be provided as of now. The parents should make their own pick up and drop off arrangements.

Kindly note that the classes will be held both in online and offline mode.

A Google Form is being shared to seek your consent. Kindly fill and submit it by Monday, 1 November 2021 before 7.00 pm. (Click here to fill the form)

It is important to mention that students can attend school with the consent of the parents only, thus you are also required to deposit the hard copy of the attached consent form duly signed to the class teacher, on the first day when you come to drop your ward to school.

L V Sehgal Principal

Parent's Consent Form (For Attending School)

To
The Principal
Bal Bharati Public School
Ganga Ram Hospital Marg
(Pusa Road Campus)
New Delhi – 110060

Subject: Consent regarding attending of School by my ward.

		(Names of the Student)
		(Name of the Student),
Class/Section	_, Admission No	am hereby pleased to
give my consent and allow n	ny ward to attend the so	chool for classes and related activities.
I will send my ward to the scl	nool wearing a mask ar	nd sensitize him/ her to maintain social
distancing, sanitize his/her ho	ands from time to time,	follow COVID appropriate behaviour
(CAB), not to share books, no	ote-books, stationery ite	ms, tiffin box etc.
I will also ensure that I shall I	not send my ward scho	ool in case my ward or anyone in the
family is suffering from COVIE)-19 symptoms.	
Date:		
Place:		
Sian	ature of the Parent:	
_		
Nan	ne of the Parent:	
Ado	dress:	
	-	
Cor	itact number:	