Reopening of School

Dear Parents

In pursuance of Delhi Government's decision on reopening of schools, the School Management has decided to commence physical classes from Monday, 14 February 2022 for the students of classes IV to VIII 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 to school in proper winter school uniform and carry minimal stationery items in a transparent plastic pouch, one/two notebooks, a water bottle and light snacks only.

	REPORTING TIME	DISPERSAL TIME
Class IV-V:	8:25 am	12:30 p.m.
Class VI :	8:15 am	12: 50 p.m.
Class VII :	8:15 am	12: 55 p.m.
Class VIII:	8:15 am	1.00 p.m.

Transportation facility will not 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.

Parental consent is a must to attend the school in hybrid mode. A Google Form is being shared to seek your consent. Kindly fill it and submit by Tuesday, 8 February 2022 before 7.00 pm (Click here to fill the Form). Also upload the picture of the consent form, duly signed by the parent, in the Google form itself.

The consent form, duly signed by the parent, must always be carried by the student in the school at all times.

L V Sehgal Principal

Parent's Consent Form (For Attending School)

To The Principal Bal Bharati Public School Ganga Ram Hospital Marg New Delhi – 110060

Subject: Consent regarding attending of School by my ward.

(Father/Mother/Guard	ian) of	(Name of the Student),
Class/Section	, Admission No	am hereby pleased to
give my consent and activities.	d allow my ward to attend the	school for classes and related
distancing, sanitize his,	the school wearing a mask and se /her hands from time to time, follo oks, note-books, stationery items, t	ow COVID appropriate behaviour
I will also ensure that I family is suffering from	shall not send my ward school in COVID-19 symptoms.	a case my ward or anyone in the
Date:		
Place:		
	Signature of the Parent:	
	Name of the Parent:	
	Address:	