



Letter No. - 1135

Date: 26-02-2021

CONSENT FORM

I.....
.....Father/Mother/Guardian ofRoll no.....2020 Batch BDS student of Dental Institute, RIMS, Ranchi do hereby declare that I am willingly sending my ward for joining offline courses of Dental Institute, RIMS, Ranchi. I have explained Govt. of India guidelines to my ward regarding COVID-19 pandemic. Any slackness in its implementation may cost him/her dearly. I also undertake that in case of any consequence caused by COVID-19 infection, RIMS authorities will not be held responsible.

Documents to be submitted at the Office at the time of joining:

1. Consent form
2. Negative RT-PCR report
3. Receipt of admission fees.

Prof. (Dr.) Narendra Nath Singh
Principal In-Charge and Dean
Dental Institute, RIMS, Ranchi

Copy to:

- 1) Director, RIMS, Ranchi.
- 2) Dean, RIMS, Ranchi
- 3) Dr. S B Singh, Website Incharge, RIMS, Ranchi