Specimen of Affidavit for students returning to University of Sargodha after reopening

		son/daughter of		, Progra	, Program	
		Roll No	resident of			
		is returning to re	join Univeristy of	Sargodha at my o	own will after	
lock d	own due to	COVID-19.				
I also	solemnly a	ffirm and declare that:				
1.		reby adhere to all safet	y protocols and o	other instructions	issued by the	
2	-	y in this regard.	10 of massert and	l b a a th . a t a t	is as fallows	
۷.	I have no symptoms of COVID-19 at present and my heath status is as follows (Encircle the relevant one):					
	a. Fo	ever		YES YES YES	NO NO NO	
3.	I have no	t been in contact with a	ny COVID-19 pati	ent during the pas	st 14 days	
4.	I am willing to undergo all processes applicable for COVID-19/Coronavirus					
	testing as and when suggested by the government of Pakistan and the University officials.					
5.	I will not safety pro	hold the University of otocols.	Sargodha liable if	I contract the vir	us despite the	
Student Name			Signature			
Stude	nt's Mobile	Number of Student		_		
Parent	c's / Guardi	an's Name	Signatur	re		
Parent	t's / Guardi	an's CNIC #				
Parent	r's / Guardi	an's Mohile Number				