

DR. AMBEDKAR INSTITUTE OF HOTEL MANAGEMENT
SECTOR-42 D, CHANDIGARH

OFFICE CIRCULAR

This is to inform all the Third year students of B.Sc. in H&HA A.S. 2020-21 that the institute is planning to open for the conduct of practical classes.

1. 3rd year students:

For the 3rd year students, the Institute will be conducting practical classes of 5th semester from **1ST FEB.2021 IN THE INSTITUTE CAMPUS.** In Institute practical classes are on **VOLUNTARY BASIS** and to join these classes the student must submit the following document.

- a) A **Consent form** duly signed by parents to attend the classes to be mailed to the Institute latest by **29-01-2021** on Email ID: **academicahmchd@gmail.com**, format of which is available on Institute's website.
- b) **RTPCR test** taken after 26th January 2021 declaring the student to be **Covid Negative.**
- c) **Aarogya Setu App** downloaded on the mobile phone of the student.

The students joining the institute are advised to make suitable arrangement for residing in Chandigarh as hostel will not be operational till further notice. **They must also take suitable precautions in institute campus and residence such as wearing mask, sanitizing hands and social distancing norms as per the Govt of India guidelines to prevent spread of the Covid-19 disease.**

No.: IHM/ADM/2K21/1848

Date: 20-01-2021

CC:

1. Institute Website
2. Student Notice Board
3. Office order file
4. Library
5. Store Department


20/01/21
(Sitesh Srivastav)

Principal
Dr. Ambedkar
Institute of Hotel Management,
Catering & Nutrition
Sector 42-D, Chandigarh

**DR. AMBEDKAR INSTITUTE OF HOTEL MANAGEMENT,
SECTOR 42-D, CHANDIGARH**

I _____ Mother/Father of
_____ who is a student of 3rd year in
Three Year B.Sc. in Hospitality & Hotel Administration at
AIHM, Chandigarh Academic Session 2020-21, hereby give my
consent to my ward for attending the practical classes in the
Institute from 01-02-2021. In case of his/her being unwell, we
will not send him/her to the Institute.

Sig. of Parent _____

Mobile No. of Parent _____

Mobile No. of Student _____

Roll No. _____

Email ID. of
Parents/Guardian _____

Date:- _____

Place:- _____