



SELF DECLARATION FORM

Date: _____

I _____ (Write your Name) hereby declare that, I/family haven't visited any place outside Bhubaneswar- Cuttack- Khurda regions in the last one week and also no guests visited us from outside.

No one in my family including myself is suffering from Influenza like symptoms.

Signature

Name: _____

Employee Code/ Roll No: _____
(If applicable)

Designation: _____
(If applicable)

School/Department: _____

Email: _____

Contact No.: _____