



NATIONAL INSTITUTE OF TECHNOLOGY DURGAPUR
Mahatma Gandhi Avenue, Durgapur 713209, India
www.nitdgp.ac.in
(An Institute of National Importance under Ministry of Education, Govt. of India)

Date: 12.10.2021

Notification for PG Final Year (2 Yrs Programme) Students

1. As approved by the competent authority, considering the present situation all willing PG final year students who have been vaccinated **at least 1st dose for COVID 19** will be allowed to come to the institute/hostel from **November 8-15th, 2021 to 31st December 2021 - 7th January 2022**, subject to the recommendation from the Supervisor, the Head of Department and their Parent.
2. All the PG final year students need to **fill up the google form with the link: <https://forms.gle/ZfUtB9KpLaBxmDGA6>** by **24th October, 2021**. Without filling this form, no one will be entertained to come to the hostel in this slot.
3. The willing PG final year, **M. Tech boys** are allotted in **Hall 4** and other **PG final year boys** are allotted in **Hall 9**. All PG final year **girls students** are allotted in **Hall 13**. **This hostel allotment is a temporary basis and the allotment of the hostel may be changed based on the situation.**
4. The declaration forms in the prescribed format [is attached with this notification] for all PG final year students signed by the student, supervisor and the HoD and parent's declaration forms must be submitted to the following mail id prior to your entry into the campus:
hall13@admin.nitdgp.ac.in [PG final year Girls Students]
hall4@admin.nitdgp.ac.in [M. Tech PG final year Boys]
hall9@admin.nitdgp.ac.in [Other PG Final year Boys]
5. Students need to bring **RT-PCR NEGATIVE** report which is not earlier than **72 hrs**.

6. Students need to bring the copies of vaccination certificate. At the security gate, they may be asked to show through the CoWIN website also.

7. The food may be available on payment basis with prior information from the guest house or Hall 12 canteen on the payment basis.

8. The students are asked to bring the essential things so that they do not need to go outside. Once they will start to stay in the hostel they will not be allowed to go outside the campus without prior permission of the warden. All the students need to follow the SoP as issued by the Ministry of Health & Family Welfare issued from time to time.

9. The following persons may be contacted regarding your hostel.

For Hall 4: Sri Gopal Chandra Mandi
E-mail: gcm.4p894@min.nitdgp.ac.in
Mobile: 9434788084

For Hall 9: Sri Amit Lakra,
E-mail: gcm.4p894@min.nitdgp.ac.in
Mobile: 9434788199

For Hall 13: Smt. Doli Mukherjee,
Email: dm.4p149@min.nitdgp.ac.in
Mobile: 9434788088

Chief Warden

Dean (S/W)



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Declaration Form for PG Final Year (2 Yrs Programme) Students

In Hostel place for M.Tech final year Boys write Hall 4, Other PG Final year boys write Hall 9 and All PG final years girls write Hall 13.

1. NAME AND CONTACT NO OF THE STUDENT:
2. ROLL NO: NAME OF THE DEPT.:
3. Vaccination Details: Single/Double Dose Date: 1st Dose 2nd Dose:
4. NAME OF THE SUPERVISORS:
5. NAME OF FATHER/ GUARDIAN (With Phone No):
6. ADDRESS:
7. HOSTEL/HALL NO:
8. PERIOD OF STAY REQUIRED AT HOSTEL:

I request you to allow me to access the Dept. Lab. of the Institute to accelerate my project work at NIT Durgapur. I assure you that I shall obey all rules and regulations of the institute and is bound to follow the SOP issued by the Ministry of Health & Family Welfare time to time. I also assure you that I shall leave the Hostel by 7th January 2022.

Signature of the student

Declaration of the Supervisor(s): The project work to be carried out by the student during this time period **is the case of extreme exigency. I shall be on station during this time period.** In any unusual situation, I/We will extend my/our supports to the student, if required.

Signature of Supervisor(s)

Phone No.:

Recommended by

Signature of HOD (With Seal)



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Parent's Declaration Form for All PG Students

If your ward feels unwell with any symptoms of Coronavirus (COVID-19), however mild, you must keep them at home and get them tested. If they have any fever, chills, cough, sore throat, shortness of breath, runny nose, and loss of sense of smell or taste – stay home, don't send them to the Institute.

Your Name:

Your Ward's Name and Roll No:

Your Contact Number:

Residential Address:

Has anyone who lives at your address returned from domestic or international travel within the 14 days?	Yes	NO
In the last 14 days, has anyone who lives at your address been in physical contact with a person's who has been diagnosed with the COVID-19 Virus?	Yes	NO
Is anyone who lives at your address currently under a form of self-isolation as the result of an order of a government authority or as the result of a recommendation by a health professional?	Yes	NO
In the last 14 days, has anyone who lives at your address been in physical contact with a person's who is in self-isolation due to COVID-19 virus?	Yes	NO
In the last 14days. Has anyone who lives at your address experienced symptoms such as <ul style="list-style-type: none">• Flu like symptom• Fever• Coughing• Shortness of Breath• Fatigue	Yes	NO

I declare that the information provided is a true and proper representation of our family's health & recent community interaction. I have no objection to send my ward to the Institute.

Parent's Signature