*It is mandatory that every student who is attending field under SEA/SAA has to submit this consent form duly signed by parent/guardian to the respective Nodal center. Hostelites need to submit the form with signature of the warden as guardian*

**Parent Consent form for SEA / SAA Field Work Participation**

***(To be submitted in the Nodal Center of the assigned SEA/SAA activity )***

|  |
| --- |
| **Name of the Nodal Center : ...................................................** |

**Student Information:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | : |  | **Roll No:** |
| **Sem / Branch /Sec***(Ex 1CSE2)* | : |  |
| **Contact Number** | : |  |
| **e-mail id**  | : |  |

**Field work Information**

|  |  |  |
| --- | --- | --- |
| **Code and Name of the SEE/SAA activity** | : |  |
| **Nodal Center** | : |  |
| **Identified places to visit for completing field work** | : |  |
| **Dates for field work at identified places** | : |  |
| **Purpose of visiting place** | : |  |

**Parent/Guardian Information:**

|  |  |  |
| --- | --- | --- |
| **Name of the Parent / Guardian** |  |  |
| **Relation (Mother/ Father/ Guardian)** | : |  |
| **Contact number** | : |  |
| **Address for correspondence** | : |  |
| **e-mail id** | : |  |

**Consent and Agreement:**

 I, ............................................................, am aware that my son/daughter/ward *[Name of the Parent]*

 .........................................................has selected ………............................................................ *[Name of the student]*

activity under SEA/SAA during B.Tech ----- Sem , AY------------------

I am aware that to complete this activity he/she has to work outside the class work hours, during weekends, holidays, semester breaks, etc. I am also aware that he/she has to participate in the field work in a chosen place (village, school, Market place---etc.) and interact with at least two eminent personalities related to the activity.

I shall ensure my son/daughter /ward takes all necessary precautions during the field work, such as avoiding water bodies, following traffic rules and using helmet if travelling by road.

I assure that my ward will abide by the institute's guidelines, respect gender sensitivity and act responsibly during the field work to uphold the dignity of the institution

Name of the Parent Signature of the Parent/Guardian with Date

**Remarks of the Counsellor:**

Spoke to the parent of the student and confirmed the consent. Verified the entries of the consent form and found all the information furnished is correct.

 Name and Designation of the Counsellor Signature of the Counsellor with Date