**Parent Consent Form**

**SNMV COLLEGE OF ARTS AND SCIENCE**

**SHRI GAMBHIRMAL BAFNA NAGAR MALUMACHAMPATTI**

**COIMBATORE – 641 050.**

From

To

The Principal,

SNMV COLLEGE OF ARTS AND SCIENCE,

Shri Gambhirmal Bafna Nagar,

Malumachampatti,

Coimbatore – 50.

UNDERTAKING FROM PARENTS

Respected Sir,

Mr…………………………………………………………………………………………father of ……………………………………………………… authorize chief warden SNMV CAS to permit my son/ daughter to travel home/ town and to go to the city as and when required at his/ her risk, as per his/ her written request. I further undertake the responsibility for all kind of losses/ damages occurred in this account and that the college will not be held responsible.

Thanking you, Yours Faithfully,

SIGNATURE OF THE

PARENT/GUARDIAN

(NAME IN CAPITALS)