



CENTRE NUMBER 63215
DALY COLLEGE
INDORE MP, INDIA

IMPORTANT: All test takers must ensure to report to the center between 7:00 am to 7:30 am.

Tentative Departure Timings: 12 noon - 12:30 pm.

INSTRUCTIONS AND PRECAUTIONARY MEASURES FOR ALL THE TEST TAKERS ON December 4, 2021.

All Test Takers are required to download the Undertaking Form from the Daly College website, submit it at entry, Checkpoint Room 1 duly filled and signed by their parents and the test taker.

ALTHOUGH THE COLLEGE BOARD HAS MADE THE EXEMPTION FROM THE ADMISSION TICKET ON THE TEST DAY, WE HIGHLY RECOMMEND THAT YOU BRING THE TICKET IN ORDER TO AVOID ANY ISSUES.PLEASE BRING YOUR PASSPORT AND ORIGINAL ADHAR CARD

- All test takers are required to wear a mask or protective face covering during the entire SAT administration. They won't be allowed in the test center without a mask, which is required for the entire duration of testing and their stay on the test center premises.
- There will be two Checkpoint Rooms, 1 and 2
- All belongings, mobile phone, calculator lids will be collected from the students at the Checkpoint Room 2 itself. Test Takers can place their devices or bags at the designated place in Checkpoint Room2/ corridor and collect them before leaving the campus. Test takers must ensure that the bags are labelled with the proper names. Mobile phones should be kept in the bags on switch off mode.
- Test takers will not be allowed to carry any devices beyond the Checkpoint Room 2, however, water bottles, snacks, desired stationery, calculator, sanitizer are allowed.
- All students are required to show their ID each time they reenter the testing room during a scheduled or unscheduled break. Test Takers should keep their printed admission ticket with them at all times.
- As with all administrations, only test materials can be on a student's desk, during testing. Sanitizer, extra masks, or other COVID-19 related supplies must be kept under their desks.
- Test Takers must pull their masks down during check-in, pulling them away from their face for visual inspection.
- Test Takers need to place ID and admission ticket face up on the admission table/proctor's desk, so that the documents can be examined without any contact.
- After the test is over, the test takers must move out of the campus without any delay, as sitting and waiting in the waiting arena is strictly prohibited for the SAT administration.

## **SAT Test Center COVID-19 Safety Screening FORM**

- I declare that:
- In the past 14 days, I have not come into close contact (within 6 feet) with someone who has tested positive for COVID-19test or is presumed to have COVID-19.
- I do not have COVID-19or have reason to believe that I have COVID-19. Symptoms of COVID-19 include cough, fever, chills, muscle pain, shortness of breath or difficulty in breathing, sore throat, new loss of taste or smell.
- To my knowledge, I am not violating any travel restrictions or quarantine requirements.
- I agree to wear a mask the entire time I am at this test center and follow instructions from test center staff, otherwise I will be dismissed.
- The test center is taking all necessary measures to help create a safe testing environment; however, it isn't possible to entirely remove the risk of COVID-19exposure. By entering the testing room, I am accepting that risk knowingly and willingly.

Name and Signature of the student:	
Date:	

## **COVID-19 DECLARATION FORM**

## TO UNDERTAKE SAT EXAM OF COLLEGE BOARD AT TEST CENTER,

DALY COLLEGE, INDORE			
no	wardSon shall be appearing for eld on December 4, 2021 at the D		Test of College Board, to
for r	full awareness and appreciation my son/daughter and on beh nistrators, assigns, and personal arge, and covenant not to sue the	nalf of my family, spo representatives do hereb	ouse, heirs, executors,
Gover claim out o	ee to indemnify and hold harm rnors, all employees or agents, so as, demands, actions, and causes f or related to any loss, damage, g exam/test, related to COVID-19	accessors, and assigns from from the of action whatsoever, directly or injury that may be suggested in the control of the cont	rom any and all liability, ectly or indirectly arising
I und	ertake the following:		
by the pain, afores	My ward shall follow physical d My ward shall hand wash with My ward shall use face cover/r not spit at any time or place wit My ward shall immediately repo My ward shall follow SOP on pre & Family Welfare, Government State Authorities and local auth My ward shall follow all instruc- measures as per the local assess in line with activities permitted ify that my ward does not have a e health officials - shortness of bre- sore throat, and loss of tast mentioned symptoms my ward wo ify that neither my ward or I, nor	soap even when hands as nask at all times inside to thin the campus. For any illness.  ventive measures issued of India and all guideling covities pertaining COVID at ions announced by the sment to prevent spread of by Ministry of Home Affany of the following COVID eath or difficulty in breath e or smell. If my ware ould not attempt the examples	by the Ministry of Health hes disseminated by the D-19; College as an additional of Covid 19 infection and hirs. D-19 symptoms outlined hing, fever, chills, muscled develops any of the hat Daly College, Indore.
	ed by health officials to self-quar	•	· · · · · · · · · · · · · · · · · · ·
	gning below I acknowledge and re understand it and sign it voluntar		
Name	e of the parent:	Signature	
Mobil	le no	Date	
Name	e of the ward (examinee):	Sign	ature

Note: 1. If the Examinee fails to meet the declaration criteria, he/she shall be denied the entry to the test center.

Address .....

2. Only asymptomatic students shall be allowed inside the test center.