## COVID-19 SELF DECLARATION FOR APPEARING IN COMPETENCY CERTIFICATE EXAMINATION CONDUCTED BY THE BOARD OF MINING EXAMINATIONS

NAI	ME OF THE CANDIDATE:
FAT	THER'S / HUSBAND'S NAME:
SI	ELF DECLARATION (UNDERTAKING) TO BE FILLED IN BY THE CANDIDATE
I _	Father's/ Husband's
Nan	ne resident of
	, do hereby declare the following
(ple	ase tick, wherever it is applicable to you, otherwise leave blank):
1.	I have not been suffering from flu-like symptoms of fever, cough, breathlessness, sore throat/ runny nose, body ache in the last 14 days
2.	I have not been in close contact with a confirmed case of the COVID-19
3.	I have not been in close with a person suffering from COVID-19 and am not under mandatory quarantine
I ha	eve read the instructions, notices and SOP for COVID-19 prevention related to
this	examination available on the official website of DGMS (www.dgms.gov.in) and the
advi	isory for candidates regarding COVID-19.
	Candidate's Signature
	Date: