

### Gate / Entry Pass

(To be filled by the applicant and to be sent through email)

### Candidate's Copy

This is to certify that Shri/ Mr./ Ms. / Mrs./ Dr./ Prof.  
....., coming from Vill. / Town.....,  
GP/ Ward No..... P.O. ...., Dist.  
....., is permitted to visit the Department / Office of the  
..... on .....(date) from ..... am / pm to  
..... am/ pm. Concerned person is requested to submit the declaration regarding  
COVID 19 protocol, if not yet submitted.

Signature of visitor

Issuing authority

### Office Copy

This is to certify that Shri/ Mr./ Ms. / Mrs./ Dr./ Prof.  
....., coming from Vill. / Town.....,  
GP/ Ward No..... P.O. ...., Dist.  
....., is permitted to visit the Department / Office of the  
..... on .....(date) from ..... am / pm to  
..... am/ pm. Concerned person is requested to submit the declaration regarding  
COVID 19 protocol, if not yet submitted.

Signature of visitor

Issuing authority

### Security Copy

This is to certify that Shri/ Mr./ Ms. / Mrs./ Dr./ Prof.  
....., coming from Vill. / Town.....,  
GP/ Ward No..... P.O. ...., Dist.  
....., is permitted to visit the Department / Office of the  
..... on .....(date) from ..... am / pm to  
..... am/ pm. Concerned person is requested to submit the declaration regarding  
COVID 19 protocol, if not yet submitted.

Signature of visitor

Issuing authority