

**COL SATSANGI'S KIRAN MEMORIAL PUBLIC SCHOOL**

(a unit of AIPECCS society)

*Satbari, Chattarpur, New Delhi – 110 074*

NO:CSKM/AEC/2018

28<sup>th</sup> September, 2018

**CIRCULAR**

**PRIVATE VAN USERS / MOTOR CABS / OMNIBUS USERS**

Dear Parent,

Kindly refer to our earlier SMS dated 05-03-2018, 05-05-2018, letter dated 08-09-2018, SMS dated 18-09-2018, 20-09-2018 and 21-09-2018 on safety matters of those students who use the above mode of transport.

We would like to inform once again to all those parents whose wards travel to the school by Private Vans hired by them follow the transport guidelines given as under :

1. Ensure the Cab / Taxi / Van is registered with concerned Transport Department under the School Cab Scheme of the Motor Vehicle Act.
2. To ensure safety of children, the vehicle registered under the scheme should be equipped with safety features including speed governors, GPRS devices, Fire Extinguisher and a First Aid Box. (The private taxis in Delhi have been granted contract carriage permits under this scheme to ferry school children).
3. As an additional safety measure, it is mandatory for the van operators to maintain a record of school children being ferried, details of parents along with phone numbers of the school children and the school they study in. (The importance of this is that this data can be shared with the Police for quick action in case of an emergency to ensure safety of a child).
4. Parents hiring such transport for their wards should also know the details of the owner and driver (Residential address / Police verification details of the driver/ Mobile Nos (Personal & Residential) both.

It is desired that the parents of their wards furnish a declaration cum undertaking (specimen as under) duly typed on a Rs.10/- stamp paper attested by a Notary Public / 1<sup>st</sup> Class Magistrate and submit the same to the Class Teacher latest by 13-10-2018.

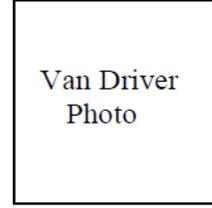
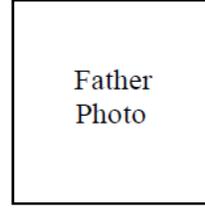
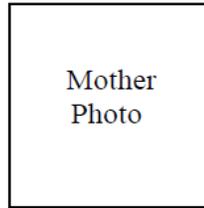
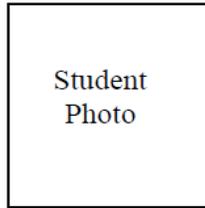
**Sd/-**

**MANAGER**

***Contd... for Declaration and Undertaking***

DECLARATION CUM UNDERTAKING

To  
**The Principal,**  
CSKM Public School  
Satbari, Chattarpur,  
New Delhi - 110074



I ....., GUARDIAN (FATHER/MOTHER) of .....  
Resident of ..... do hereby solemnly declare and affirm as under:

1. That my ward ..... is a student of class..... Admission no. ....
2. That my ward has not engaged the services of School transportation and hired the services of Vehicle registration number..... Make ..... issued by ..... authority/department.
3. That the owner of the aforesaid vehicle Sh. .... s/o ..... r/o..... and name of the driver is ..... s/o..... r/o.....
4. That I have also got the antecedents of the owner/driver verified from the police/concerned authority and he has also got valid license since..... till ..... of driving the category of vehicle that he shall be using for the transportation of my ward.
5. That I have also cross checked and ensure that owner / driver of the vehicle does have requisite permit so prescribed by the rules of the transport department concerned for "Passenger Transport Vehicle".
6. That I have gone through the copy of guidelines to be strictly followed for carrying school children to and from school in different categories of contact carriages MAXICABS / MOTOR CABS / OMNIBUS.
7. That the vehicle I am engaging complies with the guidelines and the rules of transport departments applicable for the school cabs.
8. That I further declare that I have made the above mentioned arrangement of the vehicle at my own risk and consequences and the school management / authorities shall not be amenable in any manner whatsoever for the arrangements made by me for my ward.
9. I declare that I have submitted an attested copy of the following documents with the school.
  - a. Van Driver's License
  - b. Aadhar Card of Van Driver
  - c. R C copy of Vehicle
  - d. Police Verification Document of the Van Driver

This declaration cum undertaking is executed by me on this..... day of ..... (DD/MM/YY) at Delhi.

Signature of the Executant

Witness: 1

Name: .....

Address: .....

Contact: .....

Witness: 2

Name: .....

Address: .....

Contact: .....