**Sriram Institute of Marine Studies**

 Approved by the DG Shipping Govt. of India, affiliated to Indian Maritime University, Chennai. ISO 9001; 2008 compliant MTI No 101005

**Permit to work/conduct practical by Engg Dept. -**

The objective of this form is to ensure the safety of all participants, faculty and instructors/demonstrator involved in the Practical Training as an protective action against Covid.

This contents of the forms strictly adhered to below points and duly signed by the Demonstrator on behalf of institute. Instructor to sign and put up to Head of the Institute to accord permission to commencement of the practical training. Faculty is hereby denied to conduct any training till the form is not signed/approved by the undersigned or Head of Institute.

Course and faculty data:

|  |  |  |
| --- | --- | --- |
| SNo | Course Name |  |
| (a) | Date of Practical training |  |
| (b) | Name and Rank of Faculty  |  |
| © | Name of Demonstrator |  |

1. Ensure that Institute response protocols are in accordance with the DGs guidelines related to conduct of course.

 Remarks, if any: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Ensure critical needs, including feeding water, Sanitation and hygiene (Wash) facilities are sufficient, functional and adequate.

Remarks if any;\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Ensure availability of all essential equipment like Soap, alcohol-based hand rub sanitizer, face masks, and personal protective equipment for students & staff involved in the practical. They are available in adequate quantity.

Remarks if any:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Ensure the that Changing rooms including wash rooms, toilets are cleaned and ready for use by the participants. If not, no practical be commenced.

 Remarks if, any:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. The Instructors are to ensure that participants are arranging their shoes/footwear etc. in shoe racks as provided. Candidate has locked their locks provided in the Changing room.

Remarks if any: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(f) A walk round of the Mock up being used for practical has been done by the instructor/demonstrator and ready for use.

Remarks if any:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. The Course in charges of post sea practical courses are to conduct daily

 checks to ensure compliance with measures.

1. Ensure that Faculty, instructors and students are fully vaccinated. Or RT PCR repots have been checked by the demonstrator prior to log attendance by a course participant.
2. Remarks if any: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. The water tank is full and proper water supply in the toilets, WCs and Wash basin is in order.

Declaration by the Demonstrator: I (name)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Rank/Designation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has been nominated to carry out the practical training as demonstrator in (Name of course)\_\_\_\_\_\_\_\_\_\_\_\_\_ on (date) \_\_\_\_\_\_\_\_\_\_\_. The above items as per item list (a) to (i) has been verified to ensure the safety of course participant and smooth conduct of practical. The participant have been briefed on the safety aspect of man, material and equipment. In addition to above, the fire mock up (Basic/Advanced) has been checked and no material/goods etc. found as blockage of the doors and exits. Ladders, companions and equipment are in ready position.

Submitted to HOI to obtain permission to start the practical at \_\_\_\_\_\_\_\_\_ (tine) \_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_ and endorsing my signature below to this effect.

Course Instructor: name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The details as submitted in the form above , self is satisfied and feels safe to conduct the course. The permission has been granted directing in charge to ensure above. In case any incident, self to be informed soon in person or over phone/ gangway.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Head of Institute.

Date :

Place: