## **SOUTH CENTRAL RAILWAY**

Office of the Principal Zonal Railway Training Institute Moula-Ali, Hyderabad-500040.

Date: 03-09-2020.

No:SCR-PCOM0RULE(TRG)/10/2020-ZRTI

Sr.DOM/SC,HYB,BZA,GNT,GTL&NED Sr DPO/SC,HYB,BZA,GNT,GTL&NED

Sr.DEE /TRSO/SC,BZA

Sr.DEE/TRD/GTL

Sr.DME/HYB.NED&GNT

Sub: Resumption of Class Room Training at ZRTI/MLY from 14-9-2020-reg.

Ref: 1.This Office letter even no Dt 20-07-2020.

2.CTM/G&PP/Sc Lr No T.387/Insp/CTMG/Rules/Vol-II dt 02-9-2020.

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Vide this office letter of even No dt 20-7-2020, it has been notified regarding cancellation of classroom training at ZRTI/MLY till further orders. It has now been approved by the competent authority to resume classroom training at ZRTI/MLY from 14-9-2020 in a phased manner. As the capacity is reduced to 30 to 40% of normal capacity due to maintenance of social distance norms, the revised programme is as under.

S. No.	Course Name	B. No.	No. of	From	То	Remarks
			Trainees			
1	Pro-Guard	1/20	44	14-09-20	29-09-20	Pre-matured Batch
2	Pro-ALP	4/20	56	14-09-20	28-09-30	-DO-
3	Pro CSR	1/20	04	14-09-20	01-10-20	-DO-
4	Pro-ALP	5/20	60	30-09-20	15-10-20	-DO-
5	Pro Guards	2/20	37	30-09-20	30-10-20	Fresh Batch
6	Pro SCOR	1/20	12	30-09-20	30-10-20	-DO-
7	Pro ALP	6/20	60	16-10-20	19-11-20	-DO-
8	Pro ALP	7/20	50	16-10-20	19-11-20	-DO-

The above programme is for two months. Based on the experience, the strength of the trainees will be increased to 170 for which the training scheduled is as under.

S. No.	Course Name	B. No.	No. of	From	То	Remarks
			Trainees			
1	Pro ALP	8/20	60	23.11.20	23.12.20	Fresh Batch
2	Pro ALP	9/20	55	23.11.20	23.12.20	-DO-
3	Pro ALP	10/20	55	23.11.20	23.12.20	-DO-
4	Pro ALP	11/20	60	26.12.20	27.01.21	-DO-
5	Pro ALP	12/20	55	26.12.20	27.01.21	-DO-
6	Pro ALP	13/20	55	26.12.20	27.01.21	-DO-
7	Pro ALP	01/21	60	03.02.21	05.03.21	-DO-
8	Pro ALP	02/21	55	03.02.21	05.03.21	-DO-

9	Pro ALP	03/21	55	03.02.21	05.03.21	-DO- <sup>2</sup>
10	Pro ALP	04/21	60	08.03.21	07.04.21	-DO-
11	Pro ALP	05/21	55	08.03.21	07.04.21	-DO-
12	Pro ALP	06/21	55	08.03.21	07.04.21	-DO-
13	Pro ALP	07/21	60	14.04.21	11.05.21	-DO-
14	Pro ALP	08/21	55	14.04.21	11.05.21	-DO-
15	Pro ALP	09/21	55	14.04.21	11.05.21	-DO-

However online training for Refresher and Promotional Courses will continue till further orders.

## The following instructions should be ensured compliance before reporting to ZRTI/MLY:

- 1. The trainees should get their medical check up done by Railway Authorised Medical Authority(AMA) to avoid sick people from attending the course.
- 2. All the trainees should bring medical kit consisting of:
  - Tab. Paracetamol 650mg/Tab Dolo—10 tablets to be taken on advice of Medical Officer
  - ii. Tab.VitaminC/Tab.Limcee/Tab.Suckcee 500 mg—once daily or as advised by Medical Officer
- iii. Cap .Becosules-Z or equivalent—once daily or as advised by Medical Officer
- iv. One Thermometer.
- v. Pulse Oxymeter.
- vi. Three layered masks in adequate number, to be changed every day.
- vii. Hand sanitizer bottles.
- 3. The trainees are advised to bring their own immunity boosters like branded Chyawanprash.
- 4. All the trainees shall observe social distancing in the Classrooms, inside the mess/dining hall as well as in the campus of ZRTI/MLY. They should wear masks, face shields and use pocket sanitizers etc.
- 5. **Family declaration:** The trainees should bring family declaration as per the profarma enclosed as Annexure.
- 6. Sharing of utensils-dishes, cups, soaps, towels etc. will not be allowed. As such all the trainees should bring meals plate, tumbler, tea glass, water bottle, spoon, flask and any other required things by them.
- 7. Trainees should bring their own linen such as blanket, bed sheet, pillow, pillow cover, mosquito net, bath towel, Uniform and sufficient dresses etc.
- 8. All the Trainees should download and install the *Arogya Setu* App having compatible phones. It should display "You are safe". The same will be checked by the ZRTI staff at the time of reporting at ZRTI Hostel.
- 9. Trainees shall be in possession of smart phones with sufficient mobile internet data for attending online training during quarantine period, if required.
- 10. It should be ensured that the trainees with co-morbid conditions should not be deputed for training. Such High-Risk individuals could include:
  - a. Pregnant women, lactating mothers
  - b. People with the following medical conditions
    - i. Severe Asthma or chronic lung disease
    - ii. High BP.
    - iii. People with chronic kidney disease undergoing dialysis
    - iv. Serious heart condition

- v. Any other medical condition that has potential high risk in the COVID environment in<sup>3</sup> the opinion of a medical expert
- 11. The trainees are not allowed to go out of the campus unless it is essential to do so. Such visits should exceptional and will be permitted with the prior approval of the Principal/ZRTI/MLY.
- 12. Trainees who wants to stay as Day-Scholar should take prior permission of Principal/ZRTI/MLY and they should maintain proper social distance while commuting. They will be daily screened and examined.
- 13. Feasibility will be studied to make available all the essential items such as stationery, snacks, toiletries etc. within the campus. As a precautionary measure, all trainees may bring required essential items along with them.
- 14. All the trainees should disclose their health status including fever/cough/sore throat/influenza like symptoms and the same to be submitted in a declaration form supplied by the ZRTI at the time of Reporting.
- 15. Trainees should come with valid Debit cards/Credit cards with sufficient amount in account to pay mess charges Rs 220/ + GST @ 5% per day (Mess charges may vary from time to time).
- 16. The above instructions may be modified from time to time and will be circulated.

Apart from the above, additional instructions/guidelines would be issued on reporting for training. These instructions/guidelines shall also be strictly adhered by trainees.

The concerned Sr. DPOs/DPOs and Controlling Officers may ensure that the above instructions are included in the relieving letters served to the initial trainees.

Accordingly, the trainees may be relieved to report at 8.30 hrs. in ZRTI/MLY on the dates mentioned in above tables.

All concerned are requested to note and notify all.

This revised letter superseds the letter issued on 02-9-20 on the above subject.

Encl: Annexure.

(A.L.N.REDDY)
Principal

Copy to:

PCOM/SC,PCCM/SC,PCMD/SC & PCPO/SC: for kind information DRM/SC,HYB,BZA,GNT,GTL&NED: for kind information CMS/HYB: for kind information and necessary action. CTM/G&PP/SC, CCM/ PS/SC, CEE/Plg/HQ: for inf. please

## परिवार के जिम्मेदार व्यक्ति/अभिभावक द्वारा घोषणा DECLARATION FROM RESPONSIBLE PERSON OF THE FAMILY/GUARDIAN

(प्रशिक्षण संस्थान में रिपोर्ट करते समय प्रस्तुत किया जाना अपेक्षित है. to be submitted at the time of reporting to training institute) मैं .....(नाम) श्री/श्रीमती/सुश्री ..... का ...... (संबंध) ZRTI, मौला-अली, हैदराबाद (तेलंगाना राज्य) में दिनांक ...... से आरंभ होनेवाली आरंभिक के लिए रिपोर्ट कर रहा हूं. I,.....(Name) am ...... (Mention type of relationship) of Sri/Smt./Ms. ......who is reporting to ZRTI, Moula-ali, Hyderabad(Telangana State), for Initial Training from ...... (date) प्रशिक्ष सहित परिवार के किसी भी सदस्य को कोरोना पॉजिटिव या लक्षणों से पीडित था/पीडित है. (हां / नहीं) यदि हां, तो विवरण का उल्लेख किया जाना चाहिए. Any one of Family including trainee Members are exposed/suffering/suffered from Corona Positive or symptoms.(Yes/No) If yes, details to be mentioned अन्य महत्वपूर्ण स्वास्थ्य जानकारी यदि किसी भी प्रशिक्ष (गर्भवती महिला, स्तनपान कराने वाली माँ, हाई बी.पी. , गंभीर अस्थमा, गंभीर दिल की बीमारी, क्रोनिक फेफड़ों की बीमारी ,क्रोनिक किडनी रोग डायलिसिस से गुजरती Other Important Health Information if any of the Trainee (Pregnant woman, Lactating mother, High BP, Severe Asthma, serious heart condition, Chronic Lung disease, Chronic kidney disease undergoing dialysis etc.) मैं, एतद द्वारा घोषित करता हूं कि उपर्युक्त सभी विवरण सही है. प्रशिक्षु श्री/श्रीमती/सुश्री ...... कोविड-19 या अन्य किसी भी कारण से अस्वस्थ होता है तो उनकी रक्षा हेत् उन्हें लेने के लिए आऊंगा/व्यवस्था करूंगा. I hereby declare that the above mentioned details are correct. I will come/arrange to come to take of the trainee (Name) .....to care illness. परिवार के सदस्य/अभिभावक के हस्ताक्षर Signature of the Family Member/Guardian नाम Name: मोबाइल संख्या Mobile No:

संप्रेषण के लिए पता Address for Communication: