

Declaration of consent for the self-administration of a rapid COVID-19 test at school

The self-administration of a rapid COVID-19 test requires the agreement of the person to be tested or – in the case of school children under 14 years of age – the parent or legal guardian. This consent applies to the test and to the processing of related data.

Further information on how the test will be carried out is attached to this consent form. This consent can be withdrawn at any time with future effect (by post, email or fax to the school). Withdrawal of consent does not affect the legality of any data processing or measures that took place on the basis of consent given. Withdrawal does not affect testing conducted by the health authority.

First and last name of the person to be tested:

Residential address:

Telephone number/email address (of parent or legal guardian):

I

- consent
- do not consent

to my child aged under 14 carrying out a minimally invasive COVID-19 self-administered test (i.e. without swabbing the back of the nose or throat).

Place, date

Signature of parent or legal guardian

Name (in capital letters)

Please give the signed declaration of consent to your child to take to school. It will be kept at the school.