



DECLARATION

I _____ (Full Name), bearing registration number (printed on your confirmation / receipt) _____, hereby declare the following (Tick relevant boxes)

- I am not under 14-day compulsory quarantine of any nature or stay-at-home order from Government health authorities.
- I have not been in contact with any person suspected to be exposed to coronavirus.
- I am currently not having cold, fever, shortness of breath or flu-like symptoms.
- If I feel unwell during exams, I shall inform the authorities of Goethe-Institut / Max Mueller Bhavan Mumbai without fail. Additionally, _____ (name), my _____ (relationship) may be informed by the exam center on the contact number _____ and further action can be taken.
- In an unfortunate event of contracting COVID-19 in the days after exams, I shall inform the Goethe-Institut/ Max Mueller Bhavan Mumbai in writing without fail.
- I may be contacted using the information provided in my examination form in case of any infected cases among other exam candidates detected in the two weeks following my exam and Goethe-Institut / Max Mueller Bhavan Mumbai has been informed by the infected.
- I understand that the staff of Goethe-Institut / Max Mueller Bhavan Mumbai can expel me from the premises, in case I do not follow the rules; no discussions on the same shall be entertained on the day of examination.
- I have read, understood and agree fully to the directions to be followed during the exam duration (refer to the "Information for Candidates" attached)

Date _____

Signature _____

Name _____

Contact Number _____

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