



Declaration

I (Surname / Given Name)

declare the following (Tick the relevant boxes)

- I have never been asked to follow compulsory quarantine or have followed the 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 expected to corona virus

- I am currently not having cold, fever, shortness of breath or have flu like symptoms

I fulfill **one or more** of the following requirements in order to appear for this exam

- I have been vaccinated against COVID-19 and carry the documentation for the same.
- I have recovered completely after having been infected with COVID-19.
- I have been tested negative in the last 48 hours and carry the proof of the same.

- If I feel unwell during exams, I shall inform the authorities of Goethe-Institut Chennai without fail. Additionally _____ (name), my _____ (relationship) may be informed by the exam center at _____ (number) and further action can be taken.

- In an unfortunate event of being tested positive for COVID19 in the days after exams, I shall inform Goethe-Institut Chennai through email 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 Chennai has been informed by the infected.

- I understand that the Goethe-Institut staff can expel me from the premises in case I do not follow the rules.

- I have read, understood and agree fully to the directions to be followed while in the test center (refer to the "Information for Candidates" attached)

Date:

Address of current stay in the city:

Signature