(Non-official) Translation

Declaration stating that you are not subject to a coronavirus infection when taking on-site exams at the University of Freiburg

We ask you to fill in this form to protect the health of your co-examinees as well as the supervisory staff.

Please exercise your right to withdraw from the examination, if you are affected by one of the facts detailed below.

Contact the Examinations Office immediately after your withdrawal by e-mail.

I hereby declare that

- 1. I have no symptoms of the disease (possible symptoms of COVID-19 include: runny nose, sore throat, body aches, fatigue, cough, headache, fever> 38 ° C, chills, shortness of breath); if I experience such symptoms, they are due to my allergy,
- 2. I have not tested COVID-19 positive within the last 14 days
- 3. I have not been placed under governmental domestic quarantine
- 4. I did not have contact to an infected person within the last 14 days

Please fill in the official German form! (see No 7 on the website)