

Self-declaration to carry out a corona antigen self-test for a participant (m / f / d) of our offline school program (# classroom teaching)

For submission to Kapitel Zwei Berlin on request

Personal data:

Last Name: _____

Name: _____

Address: _____

Date of Birth: _____

Email: _____

Phone: _____

I hereby confirm that my health is not impaired at the start of the course, that I have had no (corona) symptoms for 24 hours and that I can take part in the educational offer of Kapitel Zwei.

I hereby confirm that I have carried out a corona antigen self-test.

The test was carried out on (Date) _____ Time _____ .

I have used the following test _____

by manufacturer _____ .

The result wasw ___ cov-19 positive (x); ___ cov-19 negative (x).

I hereby confirm that the test used at the time of execution was approved by the BfArM for implementation by laypeople.

(pls see: https://www.bfarm.de/DE/Medizinprodukte/Antigentests/_node.html)

Date, Signature

* If the result is positive, the person must go into quarantine immediately. This also applies to members of the household of people with a positive rapid test. The quarantine may only be ended if a subsequent PCR test has a negative result. The person who tested positive is entitled to a PCR test for confirmation or refutation.