

# COVID-19 Declaration Form Sample for School Admission

Download this **COVID-19 declaration form** sample to ensure a safe and informed school admission process. The form helps schools monitor health status and prevent the spread of the virus among students and staff. It is a crucial step in maintaining a healthy learning environment during the pandemic.

## COVID-19 Declaration Form

**Student Name:**

**Date of Birth:**

**Parent/Guardian Name:**

**Contact Number:**

### Health Declaration

Please answer the following questions:

1. Has the student experienced any COVID-19 symptoms (fever, cough, difficulty breathing, loss of taste or smell) in the past 14 days?  
 Yes  No
2. Has the student been in close contact with a confirmed COVID-19 case in the past 14 days?  
 Yes  No
3. Has the student traveled internationally in the past 14 days?  
 Yes  No

### Declaration

I hereby declare that the information provided above is true and accurate to the best of my knowledge. I understand that providing false information may result in denial of admission or disciplinary action.

**Signature of Parent/Guardian:**

**Date:**

**Submit Declaration**