

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