

## COVID-19 Declaration Form

### Centre details

International House Querétaro  
MX087  
Av. Tecnológico 127 Col. Centro

### Your details

Full name:

Date of birth (DD/MM/YY):

### Exam details

Which exam are you taking?

Date of exam:

**Paper-based**

**Computer-based**

### Declaration

I am the candidate / I am the guardian of the candidate (please delete as appropriate).

The statements below are regarding the candidate:

- I confirm that I do not have symptoms associated with COVID-19.
- I confirm I have not knowingly been in contact with any people with symptoms associated with COVID-19 for the past 14 days.
- I confirm I have not travelled from any countries with travel/self-isolation restrictions in the past 14 days.

I understand that my exam may be rebooked if I cannot confirm any of the statements above.

### Signature

**Date**

**Any candidates unwilling to abide by social distancing and security measures, or any candidates with symptoms on the exam day will not be allowed into the exam.**