**Covid-19 Pre-Return to Teaching Declaration for Students**

Please use your own pen when completing this questionnaire. Students must complete this questionnaire at least 3 days prior to returning to teaching setting.

|  |  |
| --- | --- |
| **Student Details** | |
| Name: |  |
| Course attending: |  |
| Mobile No: |  |
| Email: |  |
| Date: |  |

|  |  |  |
| --- | --- | --- |
| **Questionnaire** | **Yes** | **No** |
| Do you currently have, or have you ever been diagnosed as having, Covid-19? |  |  |
| Are you required to quarantine according to [current regulations](https://www.gov.uk/government/publications/coronavirus-covid-19-how-to-self-isolate-when-you-travel-to-the-uk/coronavirus-covid-19-how-to-self-isolate-when-you-travel-to-the-uk) following travel abroad? |  |  |
| If yes, please state where. |  | |
| Have you displayed any symptoms of Covid-19 in the last 14 days, namely fever, high temperature, persistent coughing, breathing difficulties / shortness of breath, and. or loss of taste or smell? |  |  |
| If yes, which symptom(s) have you displayed |  | |
| Do you live in the same household as someone, or have been in close contact with someone, who has displayed symptoms of Covid-19 in the last 14 days or who has a confirmed case of Covid-19? |  |  |
| If yes, please provide details: |  | |
| If you answered Yes to any of the foregoing questions, have you consulted a Doctor or other medical practitioner? |  |  |
| Have you been advised by a doctor to self-isolate at this time? |  |  |
| Do you travel alone to teaching setting? |  |  |
| Do you object to your temperature being taken before entering the premises? |  |  |

**NOTE:** When in teaching setting, please ensure you follow teaching setting policy in respect of Covid-19, to include our teaching setting standard procedures regarding infection control (e.g. hand washing/hand sanitising, general coughing/sneezing etiquette, etc.). Information supplied in this questionnaire by students will be shared with Complete Communication teaching colleagues and our host setting (where appropriate), where you are attending teaching setting.

If your situation changes from that declared on your form, you should complete a new declaration immediately and not enter teaching setting buildings until it is confirmed that it is safe for you to do so.

I confirm that the above information is accurate to the best of my knowledge and I have read the **Complete Communication LTD Teaching setting Supporting Safe Learning 2020-2021** document and **Complete Communication LTD’S Terms and Conditions** and agree to the terms and to abide by the guidance and procedures set out in the document:

**Print name: \_** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**: \_\_\_\_\_\_\_\_\_\_\_\_

**Please return to Training@completecommunicationltd.com**