

## SELF DECLARATION FOR COVID-19 TEST

I, \_\_\_\_\_, aged \_\_\_\_\_ years residing at \_\_\_\_\_ and having Aadhar No \_\_\_\_\_, hereby declare and undertake as follows:

I have been exposed to COVID-19 lab reported positive case, (Name)\_\_\_\_\_ and am a probable suspect of COVID-19. Accordingly, I have given a swab sample for testing to Suburban Diagnostics.

I hereby undertake that I shall self-quarantine myself at my home for the next 36 hours or till the receipt of my report. During this period, I shall monitor my health and those around me. I will abide by all the orders as per the government rules.

In case due to my action or negligence any person develops any symptoms consistent with COVID-19, Suburban Diagnostics shall not be held responsible and liable.

I have been explained in detail about the contents of the undertaking and precautions that I need to follow while I am under self-quarantine. I am liable to be acted on under the prescribed law for any non-adherence to self-isolation protocol.

**OR**

I am 70 yrs or above/am a caretaker for a 70 yrs or above patient, thereby requesting for a COVID-19 test.

I declare that the above undertaking is voluntary and with my free will and consent as a part of preventive action in the interest of my family and the public and the society.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Contact No. \_\_\_\_\_