

AUTODICHIARAZIONE
ASSENZA DA SCUOLA PER MOTIVI DI SALUTE NON SOSPETTI PER COVID-19
Ai sensi del D.P.R. 28 dicembre 2000, n. 445

SELF-DECLARATION

ABSENCE FROM SCHOOL FOR UNSUSPECTED HEALTH REASONS FOR COVID-19

Pursuant to the D.P.R. 28 December 2000, n. 44

I, the undersigned, _____ born
in _____ on _____, and residing at
_____ as a parent (or holder of
parental responsibility)
of _____, born in
_____ on _____,

aware of all the civil and criminal consequences set out in case of false statements, and aware of the importance of compliance with preventive measures aimed at the spread of COVID-19 for the protection of the health of the community,

DECLARES

that his/her child can be readmitted to school because in the period of absence from the same he/she did not present the following potentially suspected symptoms of COVID-19:

- fever ($> 37.5^{\circ} \text{C}$)
- cough
- difficulty breathing
- conjunctivitis
- nasal rhinorrhea-congestion
- gastrointestinal symptoms (nausea/vomiting, diarrhea)
- sudden loss/alteration of taste (ageusia/disgeusia)
- sudden loss/decrease of sense of smell (anosmia/iposmia)
- sore throat
- headache
- myalgia

or

that, in the presence of any of the symptoms listed above, the parent has contacted the attending physician (Pediatrician of Choice or General Practitioner) for clinical evaluations and examinations necessary for readmission to school. The doctor has not issued the certificate required by the Note of the Ministry of Education of 03082020, but declared that the student can return to school.

Place and date _____

The parent (or holder of parental responsibility) _____