

*British Council complies with data protection law in the UK and laws in other countries that meet internationally accepted standards. You have the right to ask for a copy of the information we hold on you, and the right to ask us to correct any inaccuracies in that information. If you have concerns about how we have used your personal information, you also have the right to complain to a privacy regulator.*

The British Council is committed to providing a safe environment for all employees and visitors and in compliance with Resolution 666 of April 24, 2020, by means of which the general biosafety protocol is adopted to mitigate, control and carry out the proper management of the Coronavirus pandemic COVID-19, we need to collect some of your personal information regarding any pre-existing conditions. It is essential that you respond honestly when completing this declaration to enable the British Council to take action to minimise the risk posed to staff and visitors during the Covid-19 crisis.

By signing the below declaration, I confirm, to the best of my knowledge, that (please tick all those that apply):

- My son/daughter does not have any of the pre-existing conditions listed in the table on the following page;
- My son/daughter does not live with anyone who has one of the pre-existing conditions listed in the table on the following page;
- My son/daughter has not been diagnosed with Covid-19 or any other respiratory illness since the beginning of the lockdown period;
- To my knowledge, nobody my son/daughter lives with or have had contact with has been diagnosed with Covid-19;
- My son/daughter has not experienced any of the symptoms listed on the following page in the last fifteen (15) days;
- Nobody that my son/daughter lives with has experienced any of the symptoms listed on the following page in the last thirty (30) days;
- My son/daughter does not live with a healthcare professional;
- My son/daughter is not subject to mandatory quarantine ordered by the government or local authorities;
- My son/daughter is not subject to any other restrictions related to the area where my son/daughter lives, his/her age, the people my son/daughter has contact with or any pre-existing conditions not specified in the tables on the following page and my son/daughter does not know of any other reason that could impact upon his/her ability to work.

If you are unable to tick any of the above boxes for any reason, please provide details in this space:

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The information I have provided above is true to the best of my knowledge. If any of the above information is false, I do not hold the British Council responsible for any consequence that may arise from the false declaration.

Additionally, I confirm that my son/daughter will comply with all instructions provided in relation to safe entry and exit from the premises, movement within the premises, social distancing, uses of masks and other protective equipment and sanitation measures.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Cédula No.: \_\_\_\_\_

*For detailed information, please refer to the privacy section of our website, [www.britishcouncil.org/privacy](http://www.britishcouncil.org/privacy).*

*We will keep your information only for as long as we require it for legitimate business purposes, and then it will be destroyed securely.*

*If you wish to contact us to change or ask about the information, please contact us at this email address: [ielts@britishcouncil.org.br](mailto:ielts@britishcouncil.org.br)*

**Pre-Existing Conditions:**

- Chronic Obstructive Pulmonary Disease (COPD)
- Cardiovascular diseases
- Diabetes
- High Blood Pressure
- Pregnancy
- Obesity

**Symptoms:**

- Fever
- Cough
- Breathing Difficulty
- Fatigue
- Sore Throat
- Chills
- Muscle Pain
- Nasal Congestion
- Loss of Sense of Taste or Smell