# COVID-19: **Declaration of participation** in the scheme of **rapid antigen self-testing** *(cycle 1)*

Starting on 19 April 2021, rapid antigen self-tests are to be added to the measures included in the Ministry of Education's health scheme in all public schools in the Grand Duchy.

People are to carry out the test on themselves, using a nasal swab (approx. 2 cm inserted in the nostril, until the cotton-wool end of the swab is no longer visible).

More information about using the self-testing kit is available **online** <u>www.edutesting.lu</u>. The website also offers video clips explaining how to use the test, and an FAQ section in several languages.

### **Frequency of testing**

Every person in the school community will receive a first kit in order to carry out a test at home and become familiar with the self-test. All the necessary explanations are set out in the flyer accompanying the self-testing kit.

Thereafter, only those individuals who have handed in valid consent will receive a self-testing kit at school. Self-testing is to be carried out once a week, at home, with the help of the minor pupil's legal representatives.

### **Reporting of positive results**

In the event of a positive result, the legal representatives of the minor pupil undertake to notify immediately both the Health Inspection (*Inspection sanitaire*) (website at <a href="https://covidtracing.public.lu/covid">https://covidtracing.public.lu/covid</a> or hotline on 247-65533) and the school.

#### Consent

To communicate their **agreement** or **disagreement** to participation in the scheme, the legal representatives of minor pupils are asked to return to their class teacher (*titulaire de classe*) the **declaration of participation overleaf, duly filled in and signed**.

Consent may be withdrawn at any time, by notifying the class teacher in writing.

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I the undersigned Mr / Ms*	
(Family name)	
(First name)	
(Tel.)	
mother/father/legal representative* of	
(Family name of the pupil)	

If you have any questions about the processing of this information or wish to exercise your rights, you may (providing proof of your identity and if appropriate that of your minor child, by attaching to your request a legible, valid copy of your ID document and that of your minor child) contact the Controller (person responsible for data processing) or the Data Protection Officer at <a href="mailto:dpo@men.lu">dpo@men.lu</a>).

<sup>\*</sup> Please circle the appropriate title

The statutory rules on the protection of personal data, including the entitlements of the individuals whose data is processed (right of access to the data, right to have data deleted, corrected, etc.) are applicable under the corresponding conditions and subject to the exceptions and waivers provided for.

(First name of the pupil)	
(Registration no. (matricule)	of the pupil)
(Name of school)	
(Class)	
□ <b>agree to participate</b> in th	ne scheme of rapid antigen self-testing set out overleaf.
the school and to the	ake to test my child once a week and to declare any positive result to Health Inspection (website at <a href="https://covidtracing.public.lu/covid">https://covidtracing.public.lu/covid</a> or also undertake to refrain from passing on to anyone else the self-testing d.
□ refuse to allow my child	to participate in the scheme described overleaf .
By handing in this form, you agree	to your personal data being processed in accordance with the foregoing .
Done at (place)	on ( <i>date</i> )
	Cimpature.
	Signature

To be returned to the class teacher as quickly as possible.