SWORN STATEMENT OF ABSENCE OF COVID-19 SYMPTOMS

Passengers travelling to mainland France must show this statement to transportation companies before boarding, and to border control authorities.

I, the undersigned,

Ms/Mr:

Born on:

Nationality:

Address:

Hereby certify that I have not had any of the following symptoms in the last 48 hours:

- Fever or chills.

- Cough or worse than usual cough.

- Unusual fatigue.

- Unusual shortness of breath when I speak or during an activity.

- Unusual muscle pain and/or stiffness.

- Unexplained headaches.

- Loss of taste or smell.

- Unusual diarrhoea.

Signed in:

 On At h

Signature: