

COVID-19

PARENT/s' – GUARDIAN/s' *RESPONSIBILITY – LIABILITY*

The provisions of this statement concern only the aspects related to the COVID-19 pandemic

crisis. Its signature is compulsory. This document does not replace any other document

*eventually required to carry out a Learning Training project with **E.C.E.***

*A parent – guardian of a minor must read this document carefully before signing. This document has legal consequences; by signing this agreement, the adult confirm he/she is the child's parent and/or the legal guardian; is consenting & agreeing the participation of his/ her child to the Learning Program in Ireland as proposed by **E.C.E.** in the following statement: is aware & abiding to all rules / regulations / terms / conditions / recommendations / suggestions / advice / information and others mentioned in this document); this statement sent by email is valid too as a signature.*

I, the undersigned (Name & Surname in capitol letter) _____

Living in (Town): _____, County / Region: _____, Country: _____

Street: _____ Number: _____, Post Code: _____

Phone (Home): Phone (Mobile): E-mail:

As a father mother parental responsibility holder of:

(Minor's name & Surname in capitol letter) _____ Sex (M/F) _____

Selected candidate to come to Ireland from: _____, to: _____, having as a Sending organisation / Project Coordinator

_____ Country: _____

hereby declare under my own responsibility.

THAT

- ✦ I know, I am aware & updated of the **Covid-19** situation in Ireland & conditions of my stay abroad.
- ✦ I know, I am aware & updated of the measures & restrictions in force in Ireland for containing the **Covid-19** spread.
- ✦ I take full responsibility for my child to participate in the Mobility program in Ireland.
- ✦ My child is not subject to quarantine measures & not tested positive to **Covid-19** in my country before coming to Ireland.
- ✦ My child is in possession of an Authorized documentation (*Paper or Digital*) showing to have been vaccinated / tested negatively for the coronavirus.
- ✦ My child has not been close / in contact with people with **Covid-19** disease in the past few weeks before symptoms appeared / up to 14 days after symptoms began.
- ✦ My child has been instructed to minimize the risk of spread **Covid-19** since my arrival to Ireland.
- ✦ My child has been instructed to strictly follow all measures / regulations / restrictions / obligations / recommendations satisfaction of certain anti-Covid-related conditions set by any Irish Authorities / Organizations / Services provider involved in the Mobility project.
- ✦ My child has been instructed to do all is necessary to communicate to Irish competent territorial health authority any **Covid-19** symptom which may appear during his/her stay in Ireland and follow instructions about next steps, which may include testing & personal restrictions.
- ✦ My child has been instructed > to strictly follow all prescriptions & measures in place / mandatory quarantine – if necessary - to eliminate or completely isolate the hazard; > to minimize the risk by eliminating, so far as possible, opportunities for transmission of the virus; > to use effective personal protective equipment; > to cancel all non-essential travels & meetings & substitute virtual meetings wherever possible; > to strictly follow isolation measures if required (*completely avoiding any form of risky interaction with others*)
- ✦ I take full responsibility for my child to participate in the Mobility program in Ireland, I exempt **E.C.E.** organization / staff / its service providers from any liability arising from the beginning of the learning Training project till the end.
- ✦ I know, I am aware & updated the Learning Training project in Ireland may be subject to changes due to any unusual or unforeseeable Covid circumstances outside **E.C.E.** control where consequences could not have been avoidable even with the exercise of all due care by **E.C.E.** Consequently **E.C.E.** organization will not be liable for any early / delay departures, losses, damages, or expenses arising for any consequences howsoever arising.
- ✦ If required, my child has been instructed to regularly reporting about his/her health situation to any organization involved in my Mobility project during his/her stay in Ireland.
- ✦ The details furnished above are true & correct to the best of my knowledge & belief & I undertake the responsibility to inform **E.C.E.** of any changes therein, immediately.

Place, date & time of this declaration _____

Declarant's signature