

## Consent form for COVID-19 testing

### Introduction

This consent form is for participation in tests designed to detect asymptomatic coronavirus cases.

**Please be reminded that anyone experiencing symptoms should always follow [government guidelines to self-isolate](#), even if they have had a recent negative Covid-19 Lateral Flow test.**

Consent relates to the following groups of students:

- **For students younger than 16 years** - this form must be completed by the parent or legal guardian. (Please complete one consent form for each child you wish to participate in testing)
- **Students over 16 who are able to provide informed consent** - can complete this form themselves, having discussed participation with their parent/guardian (if they are under 18)

### Terms of consent

1. I have had the opportunity to consider the information provided by the School about the testing, asked questions and have had these answered satisfactorily, based on the information presented in the letter dated 04/03/2021 and the attached Privacy Notice.
2. In the case of under 16s, I have discussed the testing with my child and my child is happy to participate. If on the day of testing they do not wish to take part, then they will not be made to do so and consent can be withdrawn at any time ahead of the test.
3. I consent to my child having a nose and throat swab for lateral flow tests. My child will self-swab, however, if my child is unable to otherwise I understand that assistance is available. In the case of under 16s or pupils who are not able to provide informed consent, I have discussed the testing with my child and they are happy to participate and self-swab (with assistance if required)
4. I understand that there may be multiple tests required and this consent covers all tests for the below named person. If, on the day of testing they do not wish to take part, then I understand they will not be made to do so and that consent can be withdrawn at any time ahead of the test.
5. I consent that my child's sample(s) will be tested for the presence of COVID-19.
6. I understand that if child's result(s) are negative on the lateral flow test I will not be contacted by the School except where they are a close contact of a confirmed positive.
7. If the lateral flow test indicates the presence of COVID-19, I consent to my child having a nose and throat swab for confirmatory PCR testing. I/they will follow the instructions on the PCR Kit to return the test the same day to an NHS Test & Trace laboratory.
8. If the lateral flow test indicates the presence of COVID-19, I commit to ensuring that my child is removed from School premises as promptly as possible, bearing in mind they may have some anxiety following a positive test result.