



The Undersigned (name and surname) _____

Born in _____ on (date) _____

Mobile: + _____ (International number including area code)

Institution/Company _____

Position in the Company: _____

With concern to the working activity to be performed and the time to be spent at LNF - INFN

From September 20, 2021 To September 23, 2021 EAAC2021 Workshop

Referent Person: Massimo FERRARIO

DECLARES UNDER ITS OWN RESPONSIBILITY

- To be not holding any Health Authorities mandatory quarantine disposition and to have not tested positive for COVID-19;
- To have not been in touch with Covid-19 affected people in the last 14 days from now or since entering the LNF-INFN;
- To be aware of the mandatory obligation to remain home and not to enter the LNF-INFN in case of flu symptoms, such as respiratory failing, cough or 37,5° fever and to inform immediately:
**M. FERRARIO e-mail: massimo.ferrario@Inf.infn.it Mob. +39-06-94038095 ,
Dr. A. RIGLIARI e-mail: antoniettarigliari@gmail.com (INFN-LNF doctor of labor)
and the Local Health Authorities:
ASL Roma 6 - email: direzione.dh1@aslroma6.it
segreteria: tel. 06.9327.4474 - 06.9327.4172 - 376.0275234**
- To be aware that, even after entering the LNF-INFN, should any potentially dangerous harbinger, such as flu symptoms, respiratory failing, cough or 37,5° fever occur, there is still the obligation to inform immediately:
**M. FERRARIO e-mail: massimo.ferrario@Inf.infn.it, Mob. +39-06-94038095
and Dr. A. RIGLIARI antoniettarigliari@gmail.com (INFN-LNF doctor of labor)**
to keep the social distance from any other person eventually present on site and to wear the protective mask;
- To have been informed on all measures adopted by the LNF-INFN to avoid the SARS-CoV-2 spread and to be committed to their respect at all time while being at **LNF-INFN**;
- To inform promptly the INFN Director about the eventual arisen status of Covid-19 positivity, even if diagnosed after have left the INFN site, considering a time lapse of at least 14 days after the departure.

DATE

SIGNATURE