**Coronavirus Self-Declaration Form**

Due to the ongoing and rapidly changing situation with the novel – coronavirus (COVID-19), we are requiring all visitors to Brennan and Company premises to fill-out the self-declaration form below. Brennan and Company will make a decision on access to the premises based on the answers provided below.

A raised temperature can be an indicator of the presence of Covid. When you enter the building, your temperature will be taken by our non-contact temperature testing equipment. If your temperature is raised, you will not be permitted to further enter the building and must exit immediately. This is to protect everyone and reduce the risk of the spread of Covid.

**Each visitor must complete this form.**

48 hours prior to your appointment, please send it back to reception@brennanco.ie and the contact person in Brennan and Company that you have an appointment with.

|  |  |
| --- | --- |
| **First Name:** |  |
| **Last Name:** |  |
| **Appointment Date & Time:** |  |
| **Contact Person in Brennan and Company** |  |

1. Do you have any of the following flu-like symptoms:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Fever (38 ℃ or higher)** |

|  |
| --- |
|  |

 **Yes**  |

|  |
| --- |
| **X** |

 **No**  |
| **Cough**  |

|  |
| --- |
|  |

 **Yes** |

|  |
| --- |
| **X** |

 **No**  |
| **Breathlessness**  |

|  |
| --- |
|  |

 **Yes**  |

|  |
| --- |
| **X** |

 **No**  |
| **Sore Throat** |

|  |
| --- |
|  |

 **Yes**  |

|  |
| --- |
| **X** |

 **No**  |
| **Others: Please Specify** |

|  |
| --- |
|  |

 **Yes**  |

|  |
| --- |
| **X** |

 **No**  |

1. Please list the country /cities you have travelled to in the last 14 days prior to arrival at

Brennan and Company.

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Country/City:**  |  |  |  X |
| **Date of Arrival:** |  |  | X |
| **Date of Departure:** |  |  | X |

1. Have you or any immediate family member come in close contact with a confirmed case of the coronavirus in the last 14 days? (“Close contact” means being at a distance of less than one metre for more than 15 minutes.)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **I have been in close contact with a confirmed case of Coronavirus in the last 14 days.**  |

|  |
| --- |
|  |

 **Yes**  |

|  |
| --- |
| **x** |

**No** |
| **Date of Isolation finished:**  | **X** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Have you had a positive test result for coronavirus in the last 14 days?  |

|  |
| --- |
|  |

 **Yes**  |

|  |
| --- |
| **x** |

**No** |
| **Date of Test:**  | **X** |
| **Date of Isolation complete:**  |  **X** |

This document will be retained confidentially by Brennan and Company for one month after submission.

The health and wellbeing of our community is our first priority therefore Brennand and Company reserves the right to deny entry to the premises.

**Signature:**

**Date:**

**Private Data Protection Notice:**

We are collecting and processing this personal data on the basis of Art. 6 (1) (f) and Art.9 (2) (i) Regulation (EU) 2016/679 (“GDPR”) being necessary for the purpose of the legitimate interests pursued by Brennan and Company and necessary for protecting against serious cross-border threats to health.

We do this as preventive measures for our community to mitigate the risk of a novel Coronavirus disease (COVID-19) outbreak in our office.

Also, we are collecting personal date to be able to support local authorities in case of an outbreak in Stillorgan. In such a case, the data will help the authorities to trace a human -to-human transmission of the Virus.

This data sheet will be stored confidentially and is not shared with any third party, unless there will be an official request by the local authorities for reasons of public interest in the area of public health.

The datasheet will be deleted one month after collection, unless a longer period is required by the public authorities.

Thank you for your cooperation!