

Personal Declaration Form

All GOC employees and those visiting our offices, including Council and Committee members/panellists, are asked to complete and return this form at least one week (ideally two) before entering the office for the first time. If any information entered into the form subsequently changes, you should complete another form as soon as possible before re-entering the building.

Completed forms should be sent in confidence to: Jacob Sanchez, Facilities Manager, jsanchez@optical.org

Use of Data

Your co-operation in completing this form is appreciated. This form, and the information within it will be treated as confidential and will be held securely by our facilities team for 21 days for the purpose of risk management and during the coronavirus pandemic only.

First Name:		Surname:	
Staff/Visitor		Reason to attend the GOC	
Emergency Contact Number:		Emergency Contact person and Telephone:	
Name of person you are visiting/line manager (if GOC staff)		Scheduled working / visiting times	
Date of Declaration	Date: Click or tap to enter a date	Date of Review (office use only)	Date: Click or tap to enter a date.

No.	Declaration / Statement:	
1.	Fitness for Work/Visit – I confirm that I am fit to visit the office and have not experienced fever, lost taste or smell, a persistent dry cough or headaches and have not been in quarantine status within the last 14 days.	<input type="checkbox"/>
2.	Underlying Health Issues – I confirm I understand my risk profile in relation to Covid-19, and my attendance at the office is in line with agreed control measures (for GOC staff – as described in your individual risk assessment)	<input type="checkbox"/>
3.	Exposure – a) I confirm that to my knowledge I have not been exposed to someone who has displayed the symptoms of, or I have any other reason to believe has Covid-19 within the last 14 days.	<input type="checkbox"/>

4.	Exposure - b) Nor that I have travel or been in contact with someone visiting South Africa or other country with high rates of infection or virus variants in the last 10 Days.	<input type="checkbox"/>
5.	Exposure – c) I confirm that I do not live in the currently affected areas where different strains of the virus have been detected. Please refer to the link below for the latest information: <u>Surge testing for new coronavirus (COVID-19) variants - GOV.UK (www.gov.uk)</u>	<input type="checkbox"/>
6.	Family – I confirm that no person in my household is currently self-isolating.	<input type="checkbox"/>
7.	Compliance – I confirm that I have read through and will comply with the current GOC Covid-19 Risk Assessment and with all of specific requirements placed upon me relative to Covid-19.	<input type="checkbox"/>
8.	I also confirm that it is my individual choice to attend the GOC premises and have not been coerced in any way by my employer or any other person.	<input type="checkbox"/>
Note: If you have any concerns relating to this document please discuss with your Line Manager/GOC contact		

Declaration - Confirmation

I, the above-named person, confirm that the statements listed above are, to the best of my knowledge true. I understand that should any information in this form should change I must complete a new form as soon as possible before re-entering the building.

Name:

Date: