

A-Pass-Weikel Institute
Health Attestation

This form is to be completed by you prior to being admitted for an in person examination. Please initial each line, complete the contact tracing information, sign and date the form. Please bring the completed form to A-Pass-Weikel Institute.

- ___ 1. In the last 14 days, I have not been exposed to anyone known to be infected with Covid-19 virus.
- ___ 2. I completed a temperature check this morning and I did not have a fever of >99.9F.
- ___ 3. I have not had a positive test for Covid-19.
- ___ 4. I have not had any of the following symptoms in the last 10 days: cough, shortness of air, fatigue, achiness, loss of taste or smell.

If you are not able to attest truthfully to not having any of the above symptoms, you may reschedule your examination.

Signature _____ Date _____ Cell Phone: () _____

Please bring a photocopy of your driver license, 3 pencils and a basic pocket calculator to the examination. You may bring a bottle of water or soda into the testing location. Since cell phones, smart watches, textbooks & note books are prohibited; it is recommended that you secure them in your trunk before entering the test site.

PLEASE CLEARLY PRINT THE FOLLOWING INFORMATION

FIRST NAME _____ LAST NAME _____

HOME ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

E-MAIL ADDRESS _____

FOR SCHOOL USE ONLY

TEST SITE: LEX LOU COURSE #: 100AB 201PLE 204LAW 302BRKR MGMT _____ OTHER

SEAT # _____ TEST DATE _____ TIME _____

If you wish to reschedule your examination, please call 502-456-1920 or 859-278-0581.
For more information on Covid-19 please visit the following websites: <https://kycovid19.ky.gov/>
<https://www.cdc.gov/coronavirus/2019-nCoV/index.html>