



COVID-19 Testing Assurance

By affixing my signature below I affirm and swear that I have, in compliance with the New Mexico Public Education Department COVID-19 Response Toolkit for New Mexico's Public Schools issued March 10, 2022:

- Performed or had performed on myself or my student either a PCR test *or* the required number of antigen tests;
- All testing instructions were followed and;
- I received a negative result or results.

Type of Test: _____

Date and Time of Test 1: _____

Result: _____

Date and Time of Test 2, if applicable: _____

Result: _____

Fraudulent use of this form or provision of any false information on it shall be subject to disciplinary action.

Print Name

Date

Signature