INFORMED CONSENT FOR CORONAVIRUS (COVID-19) TESTING

Please carefully read and sign the following informed consent:

1. I authorize the University of Arizona to conduct collection for COVID-19 antigen testing with an anterior nares swab (just inside the nostril). This is a rapid result test that tests for active SARS-CoV-2 virus and my results will be returned to me within 1-2 hours. More information about this test can be found at: https://www.fda.gov/media/137887/download

2. I understand that my test results will be disclosed to the county, state, or to any other governmental agency as may be required by law.

3. I consent for my test result to be disclosed within the University of Arizona to certain units for the reasons outlined below:
   a. Campus Health Services: for purposes of coordination of care and treatment
   b. Housing & Residential Life: for purposes of isolation, quarantine and cleaning procedures/protocols
   c. SAFER (Student Aid for Field Epidemiology Response): for purposes of contact tracing
   d. Facilities Management: fire and safety support

3. I understand that, as with any medical test, there is the potential for a false positive or a false negative result to occur. I agree to notify Campus Health Services in the event that I start showing signs and symptoms of COVID-19, regardless of my test result.

I, the undersigned, have been provided information about the test purpose, procedures, possible benefits and risks, and I have received a copy of this informed consent. If I have any questions, I may contact Housing & Residential Life or the COVID-19 Testing Center at UACOVID-19Testing@arizona.edu, 1-833-345-0246 or 520-848-4030. I have been given the opportunity to ask questions before I sign, and I have been told that I can ask other questions at any time.

___________________________________________          ______________________________
Printed name of student                      Student’s 8-digit student ID number

____________________________________________
Signature of student

____________________________________________
Signature of parent/guardian
(if student is under the age of 18)

Date

____________________________________________
Date

If you decline to accept the terms of this Informed Consent, you will not be permitted to live on-campus for the 2020-2021 academic year and will have until Sunday, August 23, 2020 to cancel your Undergrad 2020-21 housing application in the housing portal without penalty.