

**Tuberculosis skin test (PPD Merieux) or TB INF gamma release Assay (IGRA Test),
taken within in last 12 months:**

Date and result (mm induration) of PPD Merieux:

OR Date and result of IGRA Test:

if positive (more than 6 mm induration) or reactive IGRA Test => X-Ray of the lung:

date and result of the X-Ray:

It is recommended to be informed about one's own HIV-status (the status does not have to be revealed).

**All students must be vaccinated against tetanus, diphtheria, pertussis and poliomyelitis within
the last 10 years and should bring the immunization record about it.**

Name of the vaccine and date of last vaccination:

**All students must provide proof of complete vaccination protection against the SARS-CoV-2
coronavirus.**

The vaccine type must be authorized in Germany, listed by the Paul Ehrlich Institute

(https://www.pei.de/EN/newsroom/dossier/coronavirus/coronavirus-content.html?cms_pos=3)

Name of vaccine and date of 1st vaccination:

Name of vaccine and date of 2nd vaccination:

Name of vaccine and date of 3rd vaccination:

In case of a recovered person with evidence of recovery, at least two doses of vaccine are required.

Date of positive PCR Test (Proof of recovery):

Name and address of physician:

Official stamp:

Signature of physician:

Date:

Please release this form to the clinic you applied to.