

**SOLEMNLY SWEAR**

I ..... born on.....  
hereby solemnly swear that I did not leave the Czech Republic within 14 days prior to  
..... (the date of the exam), that I am not obligated to be kept in  
quarantine, I am not aware of any change in my state of health that will not allow me  
to attend the state exam and that I will not leave the Czech Republic till the given  
state exam and I am not aware that I have been in touch with people infected by a  
coronavirus.

Date: .....

Signature: .....