

FACULTY OF MEDICINE
UNIVERSITY OF BELGRADE
Dr. Subotica 8
B e l g r a d e

Subject/Course: _____

Date: _____

C O N S E N T

I am cognizant of the recommended measures for control and prevention of the COVID-19 infection introduced at the Faculty of Medicine University of Belgrade.

I hereby declare that I will act in full compliance with these measures and recommendations.

STUDENT _____
(name written legibly
in capital letters)
STUDENT _____
(signature)
Index number _____