



PROFESSIONAL TRAVEL PROOF

I, the undersigned: _____, (job title) _____

certify that the journeys of the following person between his/her home and his/her place of professional activity, may not be deferred and is essential in the execution of their professional activities, which cannot be organized as working from home (within the meaning of Article 4 of the Ministerial Regulation issued on 30 March 2020 as part of the fight against the spread of the Covid-19 virus):

Surname:

First name:

Date of birth:

Home address:

Nature of the professional work:

Location of the professional work taking place:

Travel route:

Form of travel:

Name and stamp of the employer:

Duration¹: _____

(Date): ____/____/2020

¹ Duration may not exceed a week.