

APPLICATION FORM REGARDING THE INTENTION TO JOIN  
THE EUROPEAN FEDERATION GATEWAY SERVICE (EFGS)

1. Legal basis of this document

This application form is submitted to the eHealth Network Secretariat pursuant to section 2.1 of The Procedure to Connect and Disconnect the Participating Countries from the EFGS (European Federation Gateway Service) (in the following: "Procedure").

2. Information regarding applicant, controller and accountable entities

*This information is collected according to section 2.1, literae a), h) Procedure.*

- eHealth Network Representative submitting this application form:

Member State / Country:	<input type="text"/>
Name of institution:	<input type="text"/>
Name, Surname:	<input type="text"/>
Postal address:	<input type="text"/>
	<input type="text"/>
Email address:	<input type="text"/>
Phone number:	<input type="text"/>

- Controller of the national contact tracing and warning mobile application and its representative:

Member State / Country:	<input type="text"/>
Name of institution:	<input type="text"/>
Name, Surname:	<input type="text"/>
Postal address:	<input type="text"/>
	<input type="text"/>
Email address:	<input type="text"/>
Phone number:	<input type="text"/>

- Accountable entity for the operations of the national contact tracing and warning mobile application and its representative (business contact):

Name of entity:	<input type="text"/>
Name, Surname:	<input type="text"/>
Postal address:	<input type="text"/>
	<input type="text"/>
Email address:	<input type="text"/>
Phone number:	<input type="text"/>

- Accountable entity for the development of the national contact tracing and warning mobile application and its connection to EFGS and its representative (technical contact):

Name of entity:	<input type="text"/>
Name, Surname:	<input type="text"/>
Postal address:	<input type="text"/>
	<input type="text"/>
Email address:	<input type="text"/>

Phone number:

3. Legal basis to process the data exchanged through the EFGS and confirmation statement

*This information is collected according to section 2.1, literae b), c) Procedure.*

Please provide the following information on the legal basis to process the data exchanged through the EFGS:

- Legal basis is:

Please provide a reference to the legal basis, e.g. by naming the statutory law applicable:

- Is this legal basis sufficient to exchange the data with other participating countries through the EFGS in order to execute interoperability by all participating countries?

Please activate "YES" to confirm or "NO" to negate:

YES

NO

4. Information concerning data privacy notice and Annex 1 (Survey)

*This information is collected according to section 2.1, litera d) Procedure.*

Please provide a permanent uniform resource locator for a data privacy notice detailing the parameters of the processing in the national contact tracing and warning mobile application in the English language:


Is a completed form Annex 1 (Survey) according to section 2.1. litera d) Procedure enclosed and is its contents included in this application by reference?

Please activate "YES" to confirm or "NO" to negate:

<input type="checkbox"/> YES	<input type="checkbox"/> NO
<input type="checkbox"/>	<input type="checkbox"/>

5. Consultation of the national data protection authority and compilation of data protection impact assessment

*This information is collected according to section 2.1, literae e), f) Procedure.*

Was the national data protection authority consulted on data protection aspects of the national contact tracing and warning mobile application and were their comments taken into account?

Please activate "YES" to confirm or "NO" to negate:

<input type="checkbox"/> YES	<input type="checkbox"/> NO
<input type="checkbox"/>	<input type="checkbox"/>

If yes, please name national data protection authority consulted:


Was a data protection impact assessment performed?

Please activate "YES" to confirm or "NO" to negate:

<input type="checkbox"/> YES	<input type="checkbox"/> NO
<input type="text"/>	<input type="text"/>

6. Commitment to the off-boarding process

*This information is collected according to section 2.1, litera i) Procedure.*

Please confirm that the participating member state commits to the off-boarding process, in case the following or similar scenarios occur:

- a. The participating country decides to leave the EFGS.
- b. The COVID-19 epidemic is no longer considered a pandemic by the WHO.
- c. The participating country does no longer fulfil the required technical or security obligations. This off-boarding reason will be triggered at the request of the eHealth Network Technical Subgroup on contact tracing and warning mobile applications. When issues are resolved, the participating country can undergo a simplified on-boarding process. The reconnection to the EFGS will be validated, within two working days, by the eHealth Network Technical Subgroup on contact tracing and warning mobile applications. The Joint Controllers Subgroup will be informed of the results.
- d. The European Commission decides to discontinue the development and support of the EFGS.

Please activate "YES" to confirm or "NO" to negate:

<input type="checkbox"/> YES	<input type="checkbox"/> NO
<input type="text"/>	<input type="text"/>



7. Documentation of test and diagnosis policy, the risk parameters used and the definitions of the risk numbers

*This information is collected according to section 2.1, litera j) Procedure.*

Is a document or public URL according to section 2.1. litera j) Procedure enclosed and is its contents included in this application by reference?

Please activate "YES" to confirm or "NO" to negate:

YES

NO

8. Expected go-live date

*This information is collected according to section 2.1, litera k) Procedure.*

Please state the expected go-live date for the connection to the EFGS:

9. Checklist concerning technical aspects

*This information is collected according to section 2.1, litera l) Procedure.*

Is the checklist concerning technical aspects according to section 2.1. litera l) Procedure enclosed and is its contents included in this application by reference?

Please activate "YES" to confirm or "NO" to negate:

YES

NO

