



Student Health and Travel Declaration Form

Student's name: _____ Body temperature: _____ °F / °C

Center: _____ Class: _____

Please fill out the following form and hand it in to your teacher before the class starts (add "✓" to the appropriate box).

Part A-Travel history of the student within the last 14 days

- My child did not leave Hong Kong within 14 days before coming to class.
- My child visited a country / region outside of Hong Kong 14 days before coming to class.
Departure period: from _____ (dd/mm/yyyy departure) to _____ (dd/mm/yyyy arrival)
Travel Destinations (please specify countries and cities): _____

Part B- Has your child been diagnosed with Covid-19 ?

- No, my child has not been confirmed to have "Covid-19 Disease".
- Yes, my child was confirmed that he/she contracted "Covid-19 Disease" and he has recovered.
Date of stay in hospital: from _____ (dd/mm/yyyy) to _____ (dd/mm/yyyy)

Part C- Health condition of the student's caretaker or those living with the student

- No one caring for my child or living with him/her has been confirmed to have contracted "Covid-19 disease".
- Caretaker/ family members living in the same household as my child was/were confirmed that they have contracted "Covid-19 Disease" and has/have recovered/remained in hospital for treatment (please delete if not applicable).
The relationship between the patient and his child: _____
- Caretaker of my child or those who live with him/her in the same household has/have not been defined as "close contact" person of Covid-19 patient(s).

Part D-Student's Health

- My child has no symptoms of cough, shortness of breath, difficulty in breathing or sore throat.

Parent / Guardian Signature: _____

Name of parent / guardian (block letters): _____

Date: _____

Note: "Close contact" generally refers to people who have taken care of the patient, live with the patient, or have been exposed to the respiratory secretions and body fluids of the patient.