



**BORANG PENGISYTIHARAN KESIHATAN /
HEALTH DECLARATION FORM**



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|---|----------|------------|
| 1. Adakah anda mengalami gejala-gejala berikut?
<i>Do you have these symptoms?</i> | | |
| a) Demam / <i>Fever</i> | Ya / Yes | Tidak / No |
| b) Batuk / <i>Cough</i> | Ya / Yes | Tidak / No |
| c) Selsema / <i>Flu</i> | Ya / Yes | Tidak / No |
| d) Sesak nafas / <i>Difficulty in breathing</i> | Ya / Yes | Tidak / No |
|
2. Adakah anda pernah disahkan positif COVID-19?
<i>Have you being declared as a positive COVID-19?</i> | Ya / Yes | Tidak / No |
|
3. Adakah anda mempunyai kontak rapat dengan mereka yang disahkan POSITIF COVID-19?
<i>Do you have history of close contact with anyone who has been Diagnosed as COVID19 POSITIVE?</i> | Ya / Yes | Tidak / No |
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4. Adakah anda mempunyai sejarah perjalanan ke luar negara dalam tempoh 14 hari yang lepas?
<i>Do you have history of travelling to overseas for the last 14 days?</i> | Ya /Yes | Tidak / No |
|
5. Adakah anda sedang menjalani perintah kawalan kuarantin di rumah yang diarahkan oleh Kementerian Kesihatan Malaysia?
<i>Are you currently under strict home quarantine as instructed by Ministry of Health Malaysia?</i> | Ya / Yes | Tidak / No |

Saya mengesahkan bahawa semua maklumat yang diberikan adalah betul dan tepat. Tindakan boleh dikenakan jika maklumat yang diberikan adalah palsu.

I hereby declare that all the information given in this form is true and correct. Action can be taken if the information provided is false.

Nama / Name :

No. KP / NRIC:.....No. Tel :.....

IPT:.....

T/Tangan / Signature :

Definition close contact :

- Health care associated exposure, including providing direct care for COVID-19 patients, working with health care workers infected with COVID-19, visiting patients or staying in the same close environment of a COVID-19 patient.
- Working together in close proximity or sharing the same classroom environment with a with COVID19 patient
- Traveling together with COVID-19 patient in any kind of conveyance
- Living in the same household as a COVID-19 patient.