

MANDATORY TRAVEL/ EXPOSURE DECLARATION FORM

Due to the rapid spread of COVID-19 and the high incidence of travel-related infection, ABA is required by the Ministry of Health to disclose the whereabouts of ALL employees and students during the two weeks preceding the start of the attendance and their contact with infected or suspected persons during the period and the symptoms they had.

FAMILY DETAILS

Grade Name Please list the specific places travelled, and dates, in the 14 days leading up to returning to campus. FAMILY NAME: SIGNATURE OF FATHER: DATE: DATE:			
SIGNATURE OF FATHER:	Grade	Name	
SIGNATURE OF FATHER:			
SIGNATURE OF MOTHER:	FAMILY NA	ME:	
	SIGNATURE OF FATHER:		
DATE:	SIGNATURE OF MOTHER:		
	DATE:		