SELF DECLARATION FORM

 (To be submitted online before departure of the flight)

Name :

Date of Arrival :

Arriving From :

Local Address :

Mobile Number :

I hereby declare that:

1. I am currently not Covid-19 positive.
2. I am not suffering from any cough/fever/respiratory distress.

3. I will subject myself to the health screening by the health authorities on reaching India and

 shall abide by the decision of the authorities

4. I will make my mobile number/contact details available to the local authorities for contact

tracing if required by them.

5. I undertake to strictly adhere to the protocol as prescribed by the health authority for

institutional Quarantine/self monitoring without any deviation.

6. If I subsequently develop any of the symptoms mentioned in point 2 above, I shall inform thelocal medical officer or state call center 1800 313 444 222/033-23412600,2357

3636/1083/1085 for medical interventions.

7. I understand that furnishing incorrect information would make me liable to penal action.

Place: Signature

Date: