|  |  |
| --- | --- |
| **General Information** | |
| **Vessel:** | **Location vessel:** |
| **Name:** | **Pin number:** |
| **Boarding date:** | **Employer:** |
| **Questionnaire to be completed fully** | |
| Have you travelled from, visited or transited via any of the below mentioned **high risk areas** with COVID-19 outbreaks in the **last 14 days**?  - China mainland  - Italy  - Iran  - South Korea | Yes - No Yes - No Yes - No Yes - No |
|  |  |
| **SIGNATURE** | **DATE** |

Coronavirus Pre-Boarding Checklist for Vessels Rev2