



Ministry of Health and Family Welfare  
Government of India

**SELF REPORTING FORM to BE FILLED BY ALL INTERNATIONAL PASSENGERS**

(TO BE PRESENTED AT THE HEALTH & IMMIGRATION COUNTER)

All passengers DEPARTING FROM India are required to fill-up this proforma **in duplicate** & submit a copy each to Health and Immigration counter.

**Personal Information**

**Contact**

Address in India for All Travelers:

1	Name of the CREW			
2	ID No.		3. Flight No.	
4	Passport No.			
5	Date of Arrival			
6	Port of origin of Journey			
7	Port of final destination			

1	House Number	
2	Street/ Village	
3	Tehsil	
4	District/ City	
5	State	
6	Pin	
7	Residence Number	
8	Mobile Number * (mandatory field)	
9	E mail ID	

(PART-A)

c. Details of the cities / countries visited since last 28 days? \_\_\_\_\_

d. Are you suffering from any of the following symptoms

- Fever Yes No
- Cough Yes No
- Respiratory distress Yes No

For persons having travel history to China, Hong Kong, Republic of Korea, Italy, Iran, Japan and other **Covid-19 affected countries\*** or **contacts with people having such travel history** are requested to undergo **mandatory thermal screening** at the Health Counters.

Signature of the CREW

\*AS NOTIFIED BY W.H.O. FOR LOCAL TRANSMISSION. (<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/>)

*In case you develop symptoms such as fever and cough within 28 days of leaving this airport, restrict your outdoor movement and contact MoHFW's 24 hours helpline number 011-23978046. Call operator will tell you whom to contact further. In the meanwhile, keep yourself isolated in your house/room.*