

TRAINEE/VISITOR COVID-19 DECLARATION

At ERGT Australia the health and safety of our trainees, staff and partners is always our highest priority.

We have been closely monitoring the 2019 novel coronavirus (COVID-19) situation since January 2020 and are currently operating in accordance with ERGT's Pandemic Preparedness and Response Plan.

Please complete the questions and self-declaration below. ERGT may collect, use and disclose your personal data, as provided in this form, in accordance with ERGT's Privacy Policy (available on the ERGT website), for the purpose of COVID-19 health screening.

NAME		TIME	
COURSE		MOBILE #	

PLEASE ANSWER THE FOLLOWING QUESTIONS		YES	NO
1	<p>If you have been travelling overseas, and have recently returned to Australia, you will be required to self-isolate for 14 days. This applies to all travelers, including Australian citizens.</p> <p>Have you travelled from overseas in the last 14 days?</p>	<input type="checkbox"/>	<input type="checkbox"/>
2	<p>If you have travelled interstate or locally from a COVID-19 Hotspot, or potential Exposure site, certain restrictions may have been imposed by the State or Territory government at your destination. These restrictions may include 14 days quarantine or self isolation.</p> <p>(Hotspots/Exposure sites list are provided at reception or on government websites).</p> <p>Have you travelled from a declared hotspot/exposure site in the past 14 days?</p> <p>Note: If you answer yes to this question you may be required to have a letter from your employer stating you are an essential worker to continue training.</p>	<input type="checkbox"/>	<input type="checkbox"/>
3	<p>Have you been in contact with someone who is suspected or confirmed to be ill with COVID-19?</p> <p>"Contact" means you have provided care or had other similarly close physical contact with the person, stayed (e.g. lived with, visited) at the same place as the person, or had direct contact with respiratory secretions and body fluids of the person.</p>	<input type="checkbox"/>	<input type="checkbox"/>
4	<p>Have you had a COVID – 19 test recently and are still awaiting the results?</p> <p>Do you have any common symptoms of COVID-19: headache, sore throat, fever, runny nose, respiratory difficulty or persistant cough? (Some patients may have aches and pains, nasal congestion, tiredness, or diarrhea).</p>	<input type="checkbox"/>	<input type="checkbox"/>

Note: If you have answered yes to any of the above questions you will be directed to discuss your situation with an ERGT staff member.

Declaration: By signing below I acknowledge that the above information is true and correct to the best of my knowledge, and if circumstances change, I agree to inform my trainer/contact point as soon as possible.

SIGNATURE:		DATE:	
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