

QUESTIONNAIRE (Sample) : Enter your personal information

: Enter the shown information

QUESTIONNAIRE

2020-08-30 EN3F-Front

Outbreak of Novel Coronavirus (2019-nCoV) has been reported around the world.
This form is for detecting patients early and contacting persons who might have had close contact with patients.
Please fill out correctly and clearly in "ENGLISH" with "CAPITAL and BLOCK LETTERS" and in black or blue ink. Your personal information may be shared with public health center.

Please respond to the following questions by placing a check mark (v) in the answer box that corresponds to your response and/or fill in the blank where indicated.

Have you stayed in the following prevalent regions in the past 14 days?

Afghanistan, Albania, Algeria, Andorra, Antigua and Barbuda, Argentina, Armenia, Australia, Austria, Azerbaijan, Bahamas, Bahrain, Bangladesh, Barbados, Belarus, Belgium, Belize, Bhutan, Bolivia, Bosnia and Herzegovina, Botswana, Brazil, Brunei, Bulgaria, Cabo Verde, Cameroon, Canada, Central African Republic, Chile, China, Colombia, Comoros, Costa Rica, Cote d'Ivoire, Croatia, Cuba, Cyprus, Czech, Democratic Republic of the Congo, Denmark, Djibouti, Dominica, Dominican Republic, Ecuador, Egypt, El Salvador, Equatorial Guinea, Estonia, Eswatini, Ethiopia, Finland, France, Gabon, Gambia, Georgia, Germany, Ghana, Greece, Grenada, Guatemala, Guinea, Guinea-Bissau, Guyana, Haiti, Honduras, Hong Kong, Hungary, Iceland, India, Indonesia, Iran, Iraq, Ireland, Israel, Italy, Jamaica, Kazakhstan, Kenya, Korea, Kosovo, Kuwait, Kyrgyz, Latvia, Lebanese, Lesotho, Liberia, Libya, Liechtenstein, Lithuania, Luxembourg, Macau, Madagascar, Malawi, Malaysia, Maldives, Malta, Mauritania, Mauritius, Mexico, Moldova, Monaco, Montenegro, Morocco, Namibia, Nepal, Netherlands, New Zealand, Nicaragua, Nigeria, North Macedonia, Norway, Oman, Pakistan, Palestine, Panama, Paraguay, Peru, Philippines, Poland, Portugal, Qatar, Republic of Congo, Romania, Russia, Rwanda, Saint Christopher and Nevis, Saint Vincent and the Grenadines, San Marino, Sao Tome and Principe, Saudi Arabia, Senegal, Serbia, Sierra Leone, Singapore, Slovakia, Slovenia, Somalia, South Africa, South Sudan, Spain, Sudan, Suriname, Sweden, Switzerland, Taiwan, Tajikistan, Thailand, Trinidad and Tobago, Tunisia, Turkey, Ukraine, United Arab Emirates, United Kingdom, United States of America, Uruguay, Uzbekistan, Vatican, Venezuela, Viet Nam, Zambia, Zimbabwe

Y : YES
N : NO

①	NAME in Full		FIRST MIDDLE NAME		LAST NAME	
②	NATIONALITY		③ PASSPORT No.			
④	Sex	<input type="checkbox"/> M : Male <input type="checkbox"/> F : Female	⑤ DATE of BIRTH	YEAR / MONTH / DATE	⑥ Arrival Date	MONTH / DATE
⑦	Flight No.	AirLine code	No.	⑧ SEAT No.	No.	If crew, please write as such.

Contact Address in Japan (If transit, please write the final destination in ⑪.)

⑨ Postal Code without "-"

9808576

⑩ TEL without "-"

08028124750

⑪ PREFECTURE

Miyagi

⑫ CITY WARD

Sendai, Aoba-Ward

⑬ Street address, Hotel name, etc.

41 Kawauchi Tohoku University

⑭ e-mail address

mext-tohoku@grp.tohoku.ac.jp

⑮ Have you had any contact with people with symptoms such as fever or cough in the past 14 days? Y: YES N: NO

⑯ Have you had any contact with infected patients in the past 14 days? Y: YES N: NO

⑰ Have you had any symptoms such as fever, cough in the past 14 days? Y: YES N: NO

⑱ Are you feeling sick? Y: YES N: NO

⑲ If yes, specify symptoms A: fever B: Cough C: Fatigue D: Other Symptoms ()

⑳ Are you taking any medications such as antipyretics, cold medicines or painkillers? Y: YES N: NO

㉑ Where are you staying in Japan for 14 days? A: home B: hotel C: another place ()

㉒ Do you have a way to get around without using public transport? Y: YES N: NO

If you do not live in Japan, please answer the following questions.

Visit duration XX (month) XX (day) XX (month) XX (day)
Hotel name, etc. HOTEL XXXX
Telephone No. 0XX-0XXX-0XXX

Visit duration (month) (day) ~ (month) (day)
Hotel name, etc. _____
Telephone No. _____

Mobile phone number while in Japan 080-2812-4750 (Tohoku University)

your schedule of departure from Japan

Departure date (year) (month) (day)

Departure airport / port name _____

Flight number / vessel name _____

Any person who gives false information may be punished according to the Article 36 of the Quarantine Act. (Imprisonment of 6 months or less, or a fine not exceeding 500,000 yen)