

Pandemic COVID-19

Screening Questions



Date

Name

Host name

The following questions are required to be answered by all visitors prior to entering **Swissway Marine Holland BV**'s site. When you open the form in *Acrobat* you can easily send the completed form via the button at the bottom of the form.

1. Have you visited any countries in the past 14-days?

No

Yes (please specify which countries and region)

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2. Have you been in (close) contact with anyone who has returned from any of the countries where the virus COVID-19 is at the moment?

No

Yes (please specify which countries and region)

.....

3. Do you have any of the following symptoms: coughing, fever, shortness of breath/dyspnea, or sore throat?

No

Yes

**With this form Swissway Marine Holland BV obtains travel history of their visitors. This information will be solely used for the purpose of preventing the spread of the COVID-19 virus. The information obtained shall not be used for any other purposes and will be destroyed within 7 weeks after completion of the form.*