?????

QUESTIONNAIRE

??????????????????????????????????????????????????????????????

Please fill in the following blanks correctly, in block letters

?????????? D1 ????????? ??????????? flight1  D2 ???? ????????  ship1

kind of conveyance aircraft flight No. flight1  ship name of ship

D3 ???? ???????? train1 D4 ?????? ????????????? car1

train No. train1  car/bus license plate NO. car1

D5 ????? (????) others1

other (specify)

??? departure1 ??? arrival1  ????????????? seat1

from to seat No. seat1

?????? date1

????-???????? name1 ??????? nationality1

name in full name1 nationality nationality1

???? age1 ?? ??? D6 ??? D7 ????  ????? D7 ????????? D8 ????????? D9 ???????

age age1 years sex D6 male D7 female occupation civil servant businessman employee

?????????????????????? passport1 E1 ???????   E2 ????? (????) others1

passport No. passport1 housekeeper  other (specify)

???????????????? accom1

address in Thailand

??????????????????????????????????????????????????????????????????????????????????????????

Please list name of the countries where you stayed within two weeks before arrival.

List1

……

????????????? ? ?????????????????????????? ?????????????????????????????????????????????????????????

Please mark ? if you have had any of the following symptoms within two weeks before arrival.

F1 ?????????? (????????) F2 ??????? F3 ???????  F4 ???

diarrhea vomiting abdominal pain fever

F5 ?????????????  F6 ???????? ?????? F7 ??????  F8 ?????????????

rash  headache, sore throat  jaundice  cough or shortness of breath

F9 ?????????????? ????????? ??? G1 ????? (????) others2

enlarged lymph glands or tender lumps  other (specify)

????????? (??????????) passenger1

signature (passenger)

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officer1

…….……. ??????????????????

??????????????????????????????????????? Port Health Officer