TGGS Screening Form for Visitor

According to the safety protocol during COVID-19 virus epidemic situation,

* Please answer the questionnaire truthfully *

1.	Name		
2.	Phone Number		
		••••••	
3.	Person to contact		
	Floor		
<u>-</u>	Travel history and contact with other people during the pa	ast 14 days.	ı.
4.	Have you traveled to the risk provinces / risk areas in		
	accordance with the announcement of the Department of Disease Control?	Yes	No
5.	Please state the risk provinces / risk areas in accordance with the announcement of the Department of Disease Control.		
6.	Have you been in a community place or places where		
.	people gather, such as shopping malls, hospital, public	Yes	No
	transport, or political gatherings?		
7.	Have you touched or closed to foreigners or in contact	Yes	No
	a large group of people?		
8.	Do you have one or more of these following respiratory		
	symptoms: coughing, runny nose or an odorless nose,	Yes	No
	sore throat, difficult breathing, or trouble to breath?		

Risk Provinces / Risk Areas in accordance with the announcement of the Department of Disease Control.

Red Areas with Maximum Control:	Highest and Restricted Control Areas
1. Bangkok	1. Samut Sakhon
2. Kanchanaburi	
3. Chachoengsao	
4. Chumphon	
5. Tak	
6. Nakhon Nayok	
7. Nonthaburi	
8. Pathum Thani	
9. Prachuap Khiri Khan	
10. Prachinburi	
11. Ayutthaya	
12. Ratchaburi	
13. Ranong	
14. Lop Buri	
15. Sing Buri	
16. Samut Songkhram	
17. Suphan Buri	
18. Sakaeo	
19. Saraburi	
20. Ang Thong	
21. Chonburi	
22. Chanthaburi	
23. Trad	
24. Rayong	
25. Nakhon Pathom	
26. Samut Prakan	
27. Petchaburi	