



## Baguio – La Trinidad – Itogon – Sablan – Tuba – Tublay

### BLISTT HEALTH DECLARATION FORM

1. **NAME (PANGALAN):** \_\_\_\_\_
2. **NATIONALITY (KABANSANAN):** \_\_\_\_\_ **AGE (EDAD):** \_\_\_\_\_ **SEX (KASARIAN):** \_\_\_\_\_
3. **CONTACT NUMBER (MATATAWAGANG NUMERO):**  
**LANDLINE:** \_\_\_\_\_ **CELLPHONE:** \_\_\_\_\_
4. **HOME ADDRESS (ADDRESS NG TAHANAN):** \_\_\_\_\_  
**OFFICE ADDRESS (ADDRESS NG OPISINA):** \_\_\_\_\_  
**EMAIL ADDRESS:** \_\_\_\_\_
5. **PURPOSE OF VISIT (LAYUNIN NG PAGBISITA):** \_\_\_\_\_
6. **PLACE OF DESTINATION IN B.L.I.S.T.T (LUGAR NA PUPUNTAHAN SA B.L.I.S.T.T):** \_\_\_\_\_
7. **HAVE YOU BEEN IDENTIFIED AS A CLOSE OR GENERAL CONTACT OF ANY COVID-19 CONFIRMED CASE IN THE LAST 14 DAYS? (IKAW BA AY NATUKOY BILANG ISA SA MGA CLOSE O GENERAL CONTACT NG ISANG COVID-19 CONFIRMED CASE SA NAKARAANG 14 NA ARAW?)** \_\_\_\_\_
8. **HAVE YOU EXPERIENCED ANY OF THE FOLLOWING SYMPTOMS IN THE LAST 14 DAYS? (NAKARAMDAM KA BA NG ILAN SA MGA SUMUSUNOD NA SINTOMAS SA NAKARAANG 14 NA ARAW?):** MARKAHAN NG EKIS (x) ANG NARARAPAT

	YES	NO		YES	NO
<b>FEVER (LAGNAT)</b>	( )	( )	<b>DIARRHEA (MADALAS NA PAGDUMI)</b>	( )	( )
<b>COUGH (UBO)</b>	( )	( )	<b>DIFFICULTY IN BREATHING (HIRAP SA PAGHINGA)</b>	( )	( )
<b>COLDS (SIPON)</b>	( )	( )	<b>SORE THROAT (PANANAKIT NG LALAMUNAN)</b>	( )	( )

**DECLARATION:** I hereby certify that the above information is true and complete. I understand that my failure to answer, or a ny false or misleading information given by me may be used as a ground for the filing of cases against me under Articles 171 and 172 of the Revised Penal Code of the Philippines, or Republic Act No. 11332, otherwise known as the “Law on Reporting of Communicable Disease”. (Ako ay nagpapatunay na ang mga impormasyon na aking binigay ay totoo at kumpleto. Naiintindihan ko na ang kung anumang maling impormasyon ay maaring maging dahilan para sa paghain ng kasong criminal laban sa akin sa ilalalim ng Article 171 at 172 ng Revised Penal Code o sa ilalim ng Republic Act No. 11332).

\_\_\_\_\_  
**SIGNATURE OVER NAME (PANGALAN AT PIRMA)**

\_\_\_\_\_  
**DATE (PETA)**

<sup>1</sup> As a precautionary measure by B.L.I.S.T.T against the transmission of COVID-19, pursuant to Proclamation No. 922, dated 8 March 2020, and the Section 16 of the Local Government Code.