

Airline Passenger Health Declaration Form

The **Airline passenger health declaration form** sample is designed to streamline the process of collecting vital health information from travelers before boarding. It ensures compliance with international health regulations and helps in early detection of potential health risks. Passengers are required to provide details about their recent health status and travel history to safeguard public health.

Full Name

Passport/ID Number

Flight Number

Seat Number

Email Address

Contact Number

Nationality

Date of Birth

Countries visited in past 14 days

Have you experienced any of the following symptoms in the last 14 days?

Fever Cough Shortness of breath Sore throat
 Loss of taste/smell None

In the past 14 days, have you been in close contact with anyone diagnosed with or suspected of having an infectious disease (e.g., COVID-19, Influenza)?

Are you currently under quarantine or isolation?

Acknowledgement

I hereby declare that the information provided above is true and accurate to the best of my knowledge. I am aware that providing false information may result in denial of boarding or other penalties in accordance with applicable regulations.

I agree

[Submit Declaration](#)