# C.R.S No: 1052

## JIANG EDUCATION CENTRE PTE LTD

149 Rochor Road, Fu Lu Shou Complex, #04-12 Singapore 188425

Tel: (65) 63372048 Fax: (65) 63378283

Email: enquiry@jiang.edu.sg Website: www.jiang.edu.sg

### **Declaration Form**

Name:	Level:			
Contact number:	(parent)	(student if applicable)		
1. Have you travelled or planned to travel to Mainland China between 14 Jan 2020 and 31 Mar 2020? Yes/No If yes, specify the date and duration of travel. From// to/				
2. Do you experience one or me	ore of the following sympton	ns? Circle them please.		
Runny nose/ cough/ fever / brea	athlessness			
3. Date and time of Temperatur	e Record			
Temperature is below 38 deg	ree Celsius. Please specify	/		
Temperature is 38 degree Ce	elsius or above. Please spec	;ify		



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