Form of travel history

NAME

MALE/ FEMALE

DATE OF BIRTH

NATIONALITY –

PASSPORT NUMBER –

Please circle the name of the countries you travelled within 14 days before your arrival day in Myanmar.

Africa

Algeria, Egypt, Eswatini, Ethiopia, Cabo Verde, Ghana, Gabon, Cameroon, The Gambia, Guinea, Guinea-Bissau, Kenya, Côte d'Ivoire, Comoros, Republic of Congo, Democratic Republic of the Congo, Sao Tome and Principe, Zambia, Sierra Leone, Djibouti, Zimbabwe, Sudan, Equatorial Guinea, Senegal, Somalia, Central Africa, Tunisia, Nigeria, Namibia, Botswana, Madagascar, Malawi, Republic of South Africa, South Sudan, Mauritius, Mauritania, Morocco, Libya, Liberia, Rwanda, Lesotho

Asia

India, Indonesia, Singapore, Thailand, Korea, China (including Hong Kong and Macau), Taiwan, Nepal, Pakistan, Bangladesh, Philippines, Bhutan, Brunei, Vietnam, Malaysia, Maldives

Oceania

Australia. New Zealand

North America

United States of America, Canada

Latin America and the Caribbean

Argentine, Antigua and Barbuda, Uruguay, Ecuador, El Salvador, Guyana, Cuba, Guatemala, Grenada, Costa Rica, Colombia, Jamaica, Suriname, Saint Christopher and Nevis, Saint Vincent, Chile, Dominican Republic, Dominica, Trinidad and Tobago, Nicaragua, Haiti, Panama, The Bahamas, Paraguay, Barbados, Brazil, Venezuela, Belize, Peru, Bolivia, Honduras, Mexico

Middle East

Afghanistan, United Arab Emirates, Israel, Iraq, Iran, Oman, Qatar, Kuwait, Saudi Arabia, Turkey, Bahrain, Palestine, Lebanon

Europe

Iceland, Ireland, Azerbaijan, Albania, Armenia, Andorra, Italy, Ukraine, Uzbekistan, United Kingdom, Estonia, Austria, Netherlands, Kazakhstan, North Macedonia, Cyprus, Greece, Kyrgyz Republic, Croatia, Kosovo, San Marino, Georgia, Switzerland, Sweden, Spain, Slovakia, Slovenia, Serbia, Tajikistan, Czech Republic, Denmark, Germany, Norway, Vatican, Hungary, Finland, France, Bulgaria, Belarus, Belgium, Poland, Bosnia and Herzegovina, Portugal, Malta, Monaco, Moldova, Montenegro, Latvia, Liechtenstein, Lithuania, Romania, Luxembourg, Russia

IF not, Please tick ☐ here.

Signature –

Date –