

Canadian Armed Forces Travel Screening Declaration

Date (yyyy-mm-dd)	Last name	First name	SN
Email Address (at destination)	Telephone (at destination)	Postal Code (at destination)	Home Unit/Employer
		Point of Contact (Home Unit/Employer)	
Flight Number	Row Number and Seat Letter		

Section A: COVID-19 Symptom Self-Assessment

1. All travelers (travel to, from, or within Canada) must complete a COVID-19 self-assessment on the day before travel. A link to all provincial guidelines is available <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/symptoms/provincial-territorial-resources-covid-19.html>. If your assessment tells you to quarantine or isolate do NOT travel and follow public health advice.
2. COVID-19 vaccination, isolation and quarantine requirements may vary by Canadian province or country origin and destination. It is the passenger's responsibility to ensure they meet all entry and exit requirements for their travel
3. You are not permitted to board an RCAF aircraft if you have tested positive for COVID-19 within the previous 7 days, have reasonable grounds to suspect that you have COVID-19, or have developed signs and symptoms of COVID-19 within the previous 7 days.
4. Passengers who test positive for COVID-19 may board RCAF after 7 days of their positive test if:
 - a. they have been symptom free for 72 hours;
 - b. are not subject to quarantine or isolation orders; and
 - c. shall wear a mask if travelling between day 7-10 after COVID diagnosis.
5. Please bring a printed copy of your completed declaration with you to the passenger terminal.
6. The A3 / Director Combined Air Operations Centre, 1 Canadian Air Division Headquarters is the waiver authority for exemptions to this directive. Waivers should be sought a minimum of 96 hours prior to departure.
7. Wearing of a mask while on board RCAF aircraft is still recommend for passengers, but is no longer mandatory.

Section B: Declaration

I acknowledge that I will adhere to any pre or post-travel testing or quarantine requirements established by my employer or Federal, Provincial or Host Nation governments.

I hereby acknowledge that I have read, understand and agree to the terms in this document.

Form Effective Date: 28 October 2022

Date (yyyy-mm-dd)

Signature of Passenger / Screener