



ΚΥΠΡΙΑΚΗ ΔΗΜΟΚΡΑΤΙΑ

Passenger Locator Form

For the protection of your health from COVID-19, you will be asked to fill out this form. It is important to fill in all the fields of the form accurately. The information and your personal data will remain confidential and will be processed for public interest purposes and the protection of public health from COVID-19. **Thank you for helping us to protect your health.**

Each family member must complete a separate application. In the case of minors, accompanied or unaccompanied, passengers under the age of 18, the application must be completed, on behalf of the minors, by the custodian parent(s)/ adoptive parent(s) / legal guardian / legal representative (s), by signing the relevant (*) Declaration at the end of this Form.

The categorisation of the countries and every change in their classification can be located in the digital platform CyprusFlightPass and the following link: <https://cyprusflightpass.gov.cy/el/country-categories>.

In case of transit or transfer passengers via the Republic of Cyprus, to other Countries, only the corresponding information shall be filled in: A. TRAVEL INFORMATION B. PERSONAL INFORMATION C. CONTACT DETAILS

A. TRAVEL INFORMATION:

Kind of Travel:

Please select the relevant box that describes your travel to the Republic of Cyprus and complete the information:

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Direct flight to the Republic of Cyprus

1. Airline Name

2. Flight Number
or Registration Number

3. Seat Number (if available)

4. Country of Departure

5. Departure Date

6. Departure time

7. Arrival Airport

8. Departure date from Cyprus (if available)

9. If departure date from Cyprus is not available, please state the length of your intended stay in Cyprus:

Less than 12 months ☐ 12 months or more ☐ Permanent resident of Cyprus returning from a trip abroad ☐

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Travelling to the Republic of Cyprus via intermediate Countries without an overnight stay

1. Origin Country of Departure

2. Departure Date (Country of Origin)

3. Departure Time (Country of Origin)

4. Last Country of Departure
to the Republic of Cyprus

5. Departure Date of last Country of
Departure to the Republic of Cyprus

6. Departure time of last
Country of Departure to the Republic of Cyprus

7. Airline Name of last Departure
to the Republic of Cyprus

8. Flight Number or
Registration Number

9. Seat Number (if available)

10. Arrival Airport to the Republic of Cyprus

11. Departure date from Cyprus (if available)

12. If departure date from Cyprus is not available, please state the length of your intended stay in Cyprus:

Less than 12 months ☐ 12 months or more ☐ Permanent resident of Cyprus returning from a trip abroad ☐

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Travelling to the Republic of Cyprus via intermediate Countries with an overnight stay

1. Origin Country of Departure 2. Departure Date (Country of Origin) 3. Departure time (Country of Origin)

4. Last Country 5. Departure Date of last Country of Departure to the Republic of Cyprus 6. Departure time of last Country of Departure to the Republic of Cyprus

7. Airline Name 8. Flight Number or Registration Number 9. Seat Number (if available)

10. Arrival Airport to the Republic of Cyprus 11. Departure date from Cyprus (if available)

12. If departure date from Cyprus is not available, please state the length of your intended stay in Cyprus:

Less than 12 months ☐ 12 months or more ☐ Permanent resident of Cyprus returning from a trip abroad ☐

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Travelling via the Republic of Cyprus, as transfer or transit passenger, to other Countries

Direct flight to the Republic of Cyprus

1. Airline Name 2. Flight Number or Registration Number 3. Seat Number (if available)

4. Country of Departure 5. Departure Date 6. Departure time

7. Arrival Airport 8. Departure date from Cyprus

Direct flight from the Republic of Cyprus

1. Airline Name 2. Flight Number or Registration Number 3. Seat Number (if available)

What was the length of your stay abroad?

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Days

H. Passenger Categories

A. You are travelling to the Republic of Cyprus from a Green Category Country (country where the trip is originated through any means of mass transportation) or you are a passenger on international travel to the Republic of Cyprus from a Green Category country, via intermediate Green Category country with or without overnight stay or you will be a passenger on international travel to the Republic of Cyprus from a Green Category country via intermediate Orange or/and Red or/and Grey (special permit) Category countries without overnight stay:

YES ☐ NO ☐

If you have answered Yes to the above, you must complete documents A to G and the declarations of the document elements I and J

B. You are travelling to the Republic of Cyprus from Orange Category Country (country where the trip is originated through any means of mass transportation) or have stayed/lived in an Orange Category country within the past 14 days before the start of their trip to the Republic of Cyprus or you are a passenger on international travel to the Republic of Cyprus from a Green Category country with overnight stay in intermediate country of the Orange Category or you are a passenger on international travel to the Republic of Cyprus from Orange Category Country via intermediate country of Orange Category with or without overnight stay or you are a passenger on international travel to the Republic of Cyprus from Orange Category Country via intermediate country from Red or/and Grey (special permission) without overnight stay as per relevant Country categorization announcement of the Republic of Cyprus:

YES ☐ NO ☐

If you have answered Yes to the above, you must complete documents A to G and the declarations of the document elements I and K. Additionally, If you belong to at least one of the following categories, please tick the relevant box:

1. Cypriot citizens and their family members (foreign spouses and their minor children)

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2. Persons legally residing in the Republic of Cyprus

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3. Persons allowed to enter under the Vienna Convention¹

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4. Persons, irrespective of citizenship, where the authorities of these countries, **duly substantiated and following an announcement by the Ministry of Health (category Orange)**, are not in a position to offer Covid-19 testing to those wishing to travel to Cyprus

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Please state the Country

If you have ticked one of the boxes above, will you perform the Covid-19 test upon your entry to the Republic of Cyprus;

YES ☐ NO ☐

Note 1. If you do not belong to the above categories or If you belong to the above categories and your answer is NO, you must have conducted a lab test at an authorised lab with the sample taken within 72 hours prior to your trip to the Republic of Cyprus and possess the certificate which indicates a negative PCR result for Covid-19.

C. You are travelling to the Republic of Cyprus from Red Category Country (country where the trip is originated through any means of mass transportation) or have stayed/lived in a Red Category country within the past 14 days before the start of their trip to the Republic of Cyprus or you are a passenger on international travel to the Republic of Cyprus from a Green or Orange Category country with overnight stay in intermediate country of the Red Category or you are a passenger on international travel to the Republic of Cyprus from Red Category Country through intermediate Grey Category Country (ies) (special permission) without overnight stay as per relevant Country categorization announcement of the Republic of Cyprus.

YES ☐ NO ☐

If you have answered Yes to the above, you must complete documents A to G and the declarations of the document elements I and L

Note 2. In addition, we would like to inform you that you must have conducted a lab test at an authorised lab with the sample taken within 72 hours prior to your trip to the Republic of Cyprus and possess the certificate which indicates a negative PCR result for Covid-19 and to conduct an additional PCR for Covid-19 test upon your entry to the Republic of Cyprus.

If you belong to at least one of the following categories, please tick the relevant box:

1. Cypriot citizens and their family members (foreign spouses and their minor children)
2. Persons legally residing in the Republic of Cyprus
3. Persons allowed to enter under the Vienna Convention¹

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If you have ticked one of the boxes above, will you perform the Covid-19 test ONLY upon your entry to the Republic of Cyprus?

YES ☐ NO ☐

Note 3: If you belong to one of the above categories and you have selected to conduct the PCR test ONLY upon your entry to the Republic of Cyprus and not also upon your departure from the country of origin of your trip, you will remain in a state of mandatory isolation (quarantine) for 72 hours (03 days) regardless of whether the Lab test results for Covid-19 are negative or positive, (at your own home or a place designated by the Republic of Cyprus, If you don't possess a home in the Republic of Cyprus,) provided that you re-submitted to a PCR test for Covid-19, at the 03rd day (72 hours) after your arrival, forwarding the results of the lab test to the electronic address monada@mphs.moh.gov.cy. The self-isolation will be terminated provided the result of the repetitive lab test is negative.

Note 4: If you do not belong to the above categories and your answer is NO, you must have conducted a lab test at an authorised lab with the sample taken within 72 hours prior to your trip to the Republic of Cyprus and possess the certificate which indicates a negative PCR result for Covid-19 and to contact an additional PCR for Covid-19 test upon your entry to the Republic of Cyprus.

D. You are travelling to the Republic of Cyprus from a Grey Category Country (special permission) (country where the trip is originated through any means of mass transportation) or have stayed/lived in a Grey Category country (special permission) within the past 14 days before the start of their trip to the Republic of Cyprus or you are a passenger on international travel to the Republic of Cyprus from Green, Orange or Red Category with overnight stay in an intermediate country of the Grey Category (special permission) as per relevant Country categorization announcement of the Republic of Cyprus:

YES ☐ NO ☐

If you have answered Yes to the above, you must complete documents A to G and the declarations of the document elements I and M. If you belong to at least one of the following categories of passengers that are allowed to enter the Republic of Cyprus, please select the relevant box:

1. European Union Citizens, citizens of European Economic Area (Iceland, Norway, Liechtenstein) and citizens of Switzerland
2. Legal residents of the Republic of Cyprus
3. Passengers entitled to enter to the Republic under the Vienna Convention
4. Citizens of 3rd countries that are entitled to enter the Republic of Cyprus after acquiring a special permission from the Republic of Cyprus as defined

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.....	by the
Please insert special permission reference number	

Law of Decontamination (establishment of measures for the prevention of the spread of Covid-19) Decree 92 of 2021, as updated thereafter

Note 5. If you don't belong to the above passenger categories, you are not allowed to travel to the Republic of Cyprus.

If you belong to at least one of the following categories, please tick the relevant box:

1. Cypriot citizens and their families ((foreign spouses and children)
2. Legal residents of the Republic
3. Passengers entitled to enter to the Republic under the Vienna Convention⁵
4. Citizens of 3rd countries that are entitled to enter the Republic of Cyprus after acquiring a special permission from the Republic of Cyprus as defined by the Law of Decontamination (establishment of measures for the prevention of the spread of Covid-19) Decree 92 of 2021, as updated thereafter

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If you have ticked one of the above boxes you will be submitted to a PCR test upon your entry to the Republic of Cyprus;

YES ☐ NO ☐

Note 6. If you belong to the above categories of passengers and you have ticked the NO box, you must have conducted a lab test at an authorised lab with the sample taken within 72 hours prior to your trip to the Republic of Cyprus and possess the certificate which indicates a negative PCR result for Covid-19. Please note that European Union citizens, citizens of European Economic Area (Iceland, Lichtenstein, Norway) and Switzerland must have conducted a lab test at an authorised lab with the sample taken within 72 hours prior to your trip to the Republic of Cyprus and possess the certificate which indicates a negative PCR result for Covid-19.

I. Statement of Truth

I hereby declare, subject to sanctions under the laws of the Republic of Cyprus, that the facts and information I have provided, are complete, correct and true.

In the case of minors accompanied or unaccompanied passengers under the age of 18, the Information will be provided and the form will be completed and signed on behalf of the minors, by the custodian parent (s) or the adoptive parent (s) / legal guardian (s) / legal representative (s), by signing also the relevant (*) Declaration.

(*) I / We

(name of the custodian parent(s) / adoptive parent(s) / legal guardian / legal representative, with ID/Passport No.....solemnly declare and affirm that all Information given in respect of my/our child in this application is true. I/We have full knowledge and I/We consent to the submission of this application of my/our child. I/We make this SOLEMN DECLARATION conscientiously and with the knowledge that making a false and/or misleading declaration, will be subject to sanctions, under the laws of the Republic of Cyprus.

Date of Declaration:

Name (BLOCK CAPITALS):

Signature:

SOLEMN DECLARATIONS

J. Green Category

If you are travelling to the Republic of Cyprus from a country of the Green Category (country where the trip is originated through any means of mass transportation) or you are a passenger on international travel to the Republic of Cyprus from a Green Category country, through intermediate Green Category country with or without overnight stay or through intermediate Orange or/and Red or/and Grey (special permit) Category countries without overnight stay, as per relevant Country categorization announcement of the Republic of Cyprus:

Please declare the Country.....and complete the following Declaration:

ISOLEMNLY DECLARE THAT:

- I consent for possible COVID-19 testing, if requested, upon arrival to the Republic of Cyprus (Persons allowed to enter in the Republic of Cyprus under the Vienna Convention of 1961 and 1963 are exempted).
- I am fully aware of the risks, dangers and hazards connected to my flight and stay in the Republic of Cyprus, due to the Covid-19 pandemic. I assume and accept full responsibility for any risks of loss, harm, property damage or personal injury or death and I agree not to make claim and take proceedings against any person and/or any kind of businesses and/or authorized officers and /or the authorities of the Republic of Cyprus from any loss, liability, damages or costs that I may sustained and/or costs that I may incurred during my travel and stay to the Republic of Cyprus, as a result to COVID-19 and/or for any inconvenience I will be suffered, due to any precautionary measures applied during my trip and my stay in the Republic of Cyprus, for the purposes of protection of public health against COVID -19. This waiver of Liability, shall be binding to my family members and spouse and my heirs, assigns and personal representative, executors and successors.
- Following my return to my country of permanent residence, or to the country to which I return following the completion of my trip to the Republic of Cyprus, I shall inform the Medical Services of the Republic of Cyprus, in the case I have developed symptoms of Covid-19, within 14 days following my departure from the Republic of Cyprus (e- mail address for correspondence monada@mphs.moh.gov.cy)
- I have not experienced one of the following symptoms – fever, cough, fatigue, headache, muscle or body aches, loss of taste or smell, shortness of breath or difficulty breathing, sore throat, congestion or runny nose, within the last 14 days or I have not been in close contact with a COVID-19 confirmed case.
- I have not stayed/lived in countries of Orange and/or Red and/or Grey (special permission) Category, within the past 14 days before my departure to the Republic of Cyprus and I am not a passenger on an international journey to the Republic of Cyprus via intermediate Countries of Orange and/or Red and/or Grey (special permission) Category with an overnight stay(s)⁴, as per relevant Country categorization announcement of the Republic of Cyprus.

In the case of minors, accompanied or unaccompanied passengers under the age of 18, the Declarations will be provided and signed on behalf of the minors, by the custodian parent (s) or the adoptive parent (s) / legal guardian (s) / legal representative (s), by signing also the relevant (*) Declaration.

(*) I / We

(name of the custodian parent(s) / adoptive parent(s) / legal guardian / legal representative, with ID/Passport No..... solemnly declare and affirm that all declarations given in respect of my/our child in this application is true. I/We have full knowledge and I/We consent to the submission of this application on behalf of my/our child. I/We make this SOLEMN DECLARATION conscientiously and with the knowledge that making a false and/or misleading declaration, will be subject to sanctions, under the laws of the Republic of Cyprus.

(*) I / We submit this solemn declaration conscientiously and with the knowledge that making a false and/or misleading declaration, will be subject to sanctions, under the laws of the Republic of Cyprus.

Date of Declaration:

Name (BLOCK CAPITALS):

Signature:

K. Orange Category

If you are travelling to the Republic of Cyprus from a country of the Orange Category (country where the trip is originated through any means of mass transportation) or you have stayed/lived in Orange Category Country within the past 14 days before your departure to the Republic of Cyprus from a Green Category country or you will be a passenger on an international journey from a Green Category country with overnight stay at an intermediate country of the Orange Category or you will be a passenger on an international journey from an Orange Category country via intermediate country of the Orange Category with or without overnight stay or you will be a passenger on an international journey from an Orange Category country via intermediate country of the Red and/or Grey (special permission) Category, without overnight stay as per relevant Country categorization announcement of the Republic of Cyprus. Please declare the Country.....and complete the following Declaration:

I..... DO SOLEMNLY AND SINCERELY DECLARE that:

- I consent for possible COVID-19 testing, if requested, upon arrival to the Republic of Cyprus (Persons allowed to enter in the Republic of Cyprus under the Vienna Convention of 1961 and 1963 are exempted).
- I am fully aware of the risks, dangers and hazards connected to my flight and stay in the Republic of Cyprus, due to the Covid-19 pandemic. I assume and accept full responsibility for any risks of loss, harm, property damage or personal injury or death, and I agree not to make claim and take proceedings against any person and/or any kind of businesses and/or authorized officers and /or the authorities of the Republic of Cyprus from any loss, liability, damages or costs that I may sustained and/or costs that I may incurred during my travel and stay to the Republic of Cyprus, as a result to COVID-19 and/or for any inconvenience I will be suffered, due to any precautionary measures applied during my trip and my stay in the Republic of Cyprus, for the purposes of protection of public health against COVID -19. This waiver of Liability, shall be binding to my family members and spouse and my heirs, assigns and personal representative, executors and successors.
- Following my return to my country of permanent residence, or to the country to which I return following the completion of my trip to the Republic of Cyprus, I shall inform the Medical Services of the Republic of Cyprus, in the case I have developed symptoms of Covid-19, within 14 days following my departure from the Republic of Cyprus (e- mail address for correspondence monada@mphs.moh.gov.cy)
- I have not experienced one of the following symptoms – fever, cough, fatigue, headache, muscle or body aches, loss of taste or smell, shortness of breath or difficulty breathing, sore throat, congestion or runny nose, within the last 14 days or I have not been in close contact with a COVID-19 confirmed case.
- I have not stayed/lived in Red and/or Grey (special permission) Category Countries within the past 14 days before my departure to the Republic of Cyprus and I am not a passenger on an international journey to the Republic of Cyprus from Orange Category country with an overnight stay(s)⁵, in intermediate Countries of the Red and/or Grey (special Permission) categories as per relevant Country categorization announcement of the Republic of Cyprus.

- I am aware and accept that, in case I belong to one of the passenger categories, who have been granted the option of having the COVID -19 test performed upon entry to the Republic of Cyprus, I will personally pay the cost of the Covid-19 laboratory test.

In the case of minors, accompanied or unaccompanied passengers under the age of 18, the Declarations will be provided and signed on behalf of the minors, by the custodian parent (s) or the adoptive parent (s) / legal guardian (s) / legal representative (s), by signing also the relevant (*) Declaration.

(*) I / We

.....
(name of the custodian parent(s) / adoptive parent(s) / legal guardian / legal representative, with ID /Passport No..... solemnly declare and affirm that all declarations given in respect of my/our child in this application is true. I / We have full knowledge and I / We consent to the submission of this application on behalf of my/our child. I / We make this SOLEMN DECLARATION conscientiously and with the knowledge that making a false and/or misleading declaration, will be subject to sanctions, under the laws of the Republic of Cyprus.

Date of Declaration:

Name (BLOCK CAPITALS):

Signature:

L. Red Category

If you are travelling to the Republic of Cyprus from a country of the Red Category (country where the trip is originated through any means of mass transportation) or you have stayed / lived in Red Category Country within the past 14 days before your departure to the Republic of Cyprus from a Green or Orange Category country or you will be a passenger on an international journey to the Republic of Cyprus from a Green or Orange Category country with overnight stay at an intermediate country of the Red Category or you will be a passenger on an international journey to the Republic of Cyprus from a Red Category country via intermediate country of the Grey (special permission) Category without an overnight stay as per relevant Country categorization announcement of the Republic of Cyprus, please declare the Country.....and complete the following Declaration:

I..... DO SOLEMNLY AND SINCERELY DECLARE that:

- I consent for possible COVID-19 testing, if requested, upon arrival to the Republic of Cyprus (Persons allowed to enter in the Republic of Cyprus under the Vienna Convention of 1961 and 1963 are exempted).
- I am fully aware of the risks, dangers and hazards connected to my flight and stay in the Republic of Cyprus, due to the Covid-19 pandemic. I assume and accept full responsibility for any risks of loss, harm, property damage or personal injury or death, and I agree not to make claim and take proceedings against any person and/or any kind of businesses and/or authorized officers and /or the authorities of the Republic of Cyprus from any loss, liability, damages or costs that I may sustained and/or costs that I may incurred during my travel and stay to the Republic of Cyprus, as a result to COVID-19 and/or for any inconvenience I will be suffered, due to any precautionary measures applied during my trip and my stay in the Republic of Cyprus, for the purposes of protection of public health against COVID -19. This waiver of Liability, shall be binding to my family members and spouse and my heirs, assigns and personal representative, executors and successors.
- Following my return to my country of permanent residence, or to the country to which I return following the completion of my trip to the Republic of Cyprus, I shall inform the Medical Services of the Republic of Cyprus, in the case I have developed symptoms of Covid-19, within 14 days following my departure from the Republic of Cyprus (e- mail address for correspondence monada@mphs.moh.gov.cy)
- I have not experienced one of the following symptoms – fever, cough, fatigue, headache, muscle or body aches, loss of taste or smell, shortness of breath or difficulty breathing, sore throat, congestion or runny nose, within the last 14 days or I have not been in close contact with a COVID-19 confirmed case.
- I am aware and accept that I am obliged to conduct a lab test for COVID -19 at an authorised lab with the sample taken within 72 hours prior to my trip to the Republic of Cyprus and possess the certificate which indicates a negative PCR result for Covid-19.
- I am aware and accept that I am obliged to conduct a lab test for COVID -19 test upon entry to the Republic of Cyprus and I will remain in a designated place, if will be indicated to me by the Republic of Cyprus, for as long as it is necessary, until the results of the laboratory test are completed and pay any accommodation and transportation costs may arise.

- I am aware and accept that I will personally pay the cost of the Covid-19 laboratory test, performed upon my entry into the Republic of Cyprus.
- I am aware and accept that If I belong to the passenger categories that have been granted the option by the Republic of Cyprus to conduct the lab test for Covid-19 only upon their entry to the Republic of Cyprus and I have decided to conduct the Lab test for Covid-19 only upon my entry, I will remain in a state of mandatory self-isolation or quarantine.
- I am aware and accept that in the case of self-isolation or quarantine I will self-isolate for 72 hours (03 days) according to the instructions and measures of safety and self-protection of the Ministry of Health regardless of whether the Lab test results for Covid-19 are negative or positive, (at my own home or a place designated by the Republic of Cyprus, If I don't possess a home in the Republic of Cyprus) , provided that I will be re-submitted to a PCR test for Covid-19, 72 hours (03 days) after my arrival, forwarding the results of the lab test to the electronic address monada@mphs.moh.gov.cy ¹⁰
- I am aware and accept that if I decide to be re-subjected to a PCR test for Covid-19 after 72 hours (03 days), in the event that the result of the repeated Lab test is negative, my self-isolation will be terminated.
- I have not stayed/lived in countries of Grey (special permission) Category, within the past 14 days before my departure to the Republic of Cyprus and I am not a passenger on an international journey to the Republic of Cyprus from a country of the Red Category with overnight stay in a country of the Grey category (special permission) as per relevant Country categorization announcement of the Republic of Cyprus.¹¹

In the case of minors, accompanied or unaccompanied passengers under the age of 18, the Declarations will be provided and signed on behalf of the minors, by the custodian parent (s) or the adoptive parent (s) / legal guardian (s) / legal representative (s), by signing also the relevant (*) Declaration.

(*) I / We

.....
..... (name of the custodian parent(s) / adoptive parent(s) / legal guardian / legal representative, with ID / Passport No..... solemnly declare and affirm that all declarations given in respect of my/our child in this application is true. I / We have full knowledge and I/We consent to the submission of this application on behalf of my/our child. I / We make this SOLEMN DECLARATION conscientiously and with the knowledge that making a false and/or misleading declaration, will be subject to sanctions, under the laws of the Republic of Cyprus.

Date of Declaration:

Name (BLOCK CAPITALS):

Signature:

M. Grey Category (special permission)

If you are travelling to the Republic of Cyprus from a country of the Grey Category (special permission) (country where the trip is originated through any means of mass transportation) or you have stayed/lived in a Grey Category Country (special permission) within the past 14 days before your departure to the Republic of Cyprus or you are a passenger on an international journey to the Republic of Cyprus from a Green, Orange or Red Category country with an overnight stay via an intermediate country of the Grey Category (special permission) as per relevant Country categorization announcement of the Republic of Cyprus, please declare the Country.....and complete the following Declaration:

I..... **DO SOLEMNLY AND SINCERELY DECLARE that:**

- I consent for possible COVID-19 testing, if requested, upon arrival to the Republic of Cyprus (Persons allowed to enter in the Republic of Cyprus under the Vienna Convention of 1961 and 1963 are exempted).
- I am fully aware of the risks, dangers and hazards connected to my flight and stay in the Republic of Cyprus, due to the Covid-19 pandemic. I assume and accept full responsibility for any risks of loss, harm, property damage or personal injury or death and I agree not to make claim and take proceedings against any person and/or any kind of businesses and/or authorized officers and /or the authorities of the Republic of Cyprus from any loss, liability, damages or costs that I may sustained and/or costs that I may incurred during my travel and stay to the Republic of Cyprus, as a result to COVID-19 and/or for any inconvenience I will be suffered, due to any precautionary measures applied during my trip and my stay in the Republic of Cyprus, for the purposes of protection of public health against COVID -19. This waiver of Liability, shall be binding to my family members and spouse and my heirs, assigns and personal representative, executors and successors.
- Following my return to my country of permanent residence, or to the country to which I return following the completion of my trip to the Republic of Cyprus, I shall inform the Medical Services of the Republic of Cyprus, in the case I have developed symptoms of Covid-19, within 14 days following my departure from the Republic of Cyprus (e-mail address for correspondence monada@mphs.moh.gov.cy)
- I have not experienced one of the following symptoms – fever, cough, fatigue, headache, muscle or body aches, loss of taste or smell, shortness of breath or difficulty breathing, sore throat, congestion or runny nose, within the last 14 days or I have not been in close contact with a COVID-19 confirmed case.
- I am aware and accept that If I belong to the passenger categories that have been granted the option by the Republic of Cyprus to conduct the lab test for Covid-19 only upon their entry to the Republic of Cyprus and I have decided to conduct the Lab test for Covid-19 only upon my entry, I will personally pay the cost of the Covid-19 laboratory test.
- I am aware and accept that in the case of self-isolation or quarantine I will either self-isolate for 14 days according to the instructions and measures of safety and self-protection of the Ministry of Health regardless of whether the Lab test results for Covid-19 are negative or positive, (at my own home or a place designated by the Republic of Cyprus, If I don't possess a home in the Republic of Cyprus,) or for ~~seven~~ ten days if I will be re-submitted to a PCR

test for Covid-19, after ~~seventeen~~ (0710) days, forwarding the results of the lab test to the electronic address monada@mphs.moh.gov.cy¹³

- I am aware and accept that if I decide to be re-subjected to a PCR test for Covid-19 after ~~seventeen~~ (0710) days, in the event that the result of the repeated Lab test is negative, my self-isolation will be terminated.

In the case of minors, accompanied or unaccompanied passengers under the age of 18, the Declarations will be provided and signed on behalf of the minors, by the custodian parent (s) or the adoptive parent (s) / legal guardian (s) / legal representative (s), by signing also the relevant (*) Declaration

(*) I / We

.....
.....(name of the custodian parent(s) / adoptive parent(s) / legal guardian / legal representative, with ID / Passport No..... solemnly declare and affirm that all declarations given in respect of my / our child in this application is true. I / we have full knowledge and I / We consent to the submission of this application on behalf of my / our child. I / We make this SOLEMN DECLARATION conscientiously and with the knowledge that making a false and / or misleading declaration, will be subject to sanctions, under the laws of the Republic of Cyprus.

Date of Declaration:

Name (BLOCK CAPITALS):

Signature: