108學年度國立東華大學資訊工程學系撥穗典禮參加人員健康關懷調查表

108 Academic Year NDHU CSIE Turning -Tassel Ceremony Epidemic Prevention form (Visitor)

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| **基本資料 Basic Information** |
| 1. 姓名(Name)：\_\_\_\_\_\_\_\_\_\_\_\_ 聯絡電話(Phone Number)：\_\_\_\_\_\_\_\_\_\_\_\_   身分證/護照號碼(ID/Passport No.)：\_\_\_\_\_\_\_\_\_\_\_\_   1. 學生姓名(Student’s name)：\_\_\_\_\_\_\_\_\_\_\_\_ 關係(Relationship)：\_\_\_\_\_\_\_\_\_\_\_\_   聯絡電話：\_\_\_\_\_\_\_\_\_\_\_\_ |
| **旅遊史調查 Tourism History** |
| 1. 近期是否有出入境旅遊史？ Have you been to other countries in these two weeks?  □否(No), □是(Yes) (請繼續回答第2及第3小題Please answer the next two questions if your answered “yes” in this question) 2. 旅遊及轉機國家The place you traveled and transferred is:：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 3. 返臺入境時間The date you entered Taiwan is:：109年 \_\_\_\_月\_\_\_\_日 \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (yy/mm/dd) |
| **列管及接觸史調查 Quarantine and Contact History** |
| 1. 您或您家屬是否曾與感染 COVID-19（新冠肺炎）病患有接觸？Have you or your family members ever been in contact with an infected (COVID-19) person?   □否(No) □是(Yes)   1. 您是否曾為列管居家檢疫或隔離個案？Have you ever been the one who needs home quarantine or isolated case?   □否(No) □是(Yes)，管制解除日期Date you end the quarantine is：\_\_\_\_月\_\_\_\_日 \_\_\_\_ / \_\_\_\_ (mm/dd) |
| **目前是否出現以下症狀：(可複選) Have you had any symptoms below ?** |
| □無(No) □有(Yes)：發燒( >38 度)(Fever) □咳嗽(Cough) □喉嚨痛(Sore throat) □流鼻水(Runny/stuffy nose) □肌肉痠痛(Muscle ache) □呼吸道窘迫症狀 (呼吸急促、呼吸困難) (Shortness of breath)□關節痠痛(Joint soreness) □四肢無力(Limb weakness) □腸胃道症狀(Gastrointestinal symptoms) □其他(Others) |