Critical Worker Travel Application Form

Surname(s):	
First Name(s):	
Position/Job Title:	
Employer:	
Line Manager(s)/Area(s) of Work:	
Contact Number:	
E-Mail:	
Address whilst in Guernsey:	
Exemption Category (e.g.	
Financial Stability)	
Nature of Work:	
Please include the reason for	
travel and why this should be	
considered critical, including	
why it is not possible for the	
worker to self-isolate in the	
normal way on arrival	
Please explain how the risk	
mitigation and exemptions	
conditions will be fulfilled?	
Please detail any hospital	
worked in, in the previous 14	
days if applicable:	
Do you have now, or have you	
in the last 14 days had any	
symptoms associated with	
COVID-19? If yes, please provide	
details	

Have you had any known	
contact with positive or	
suspected Covid-19 case in last	
14 days (Yes/No): If yes please	
provide details	
Proposed dates of travel:	Journey 1
	Date:
	Departure location &
	time:
	Arrival location &
	time:
	Mode of transport
	(flight number or
	vessel name):
	Journey 2:
	_
	Date:
	Departure location &
	time:
	Arrival location &
	time:
	Mode of transport
	(flight number or
	vessel name):

Declaration

I, [insert full name]......declare that the information provided in this application is, to the best of my knowledge and belief, true and accurate.

I confirm that I am authorised by [insert name of person, his/her position within the company and the company's full name] to make this application.

I understand that I must not travel into the Bailiwick of Guernsey if I have any symptoms associated with COVID-19 (fever, new cough, sore throat, loss of taste or smell) at the time of travel, even if a critical worker travel exemption has been previously approved.

I understand that if my application is successful and I do not comply with the conditions which apply to me, the variation of the self-isolation requirement as it applies to me will lapse, and I may be liable to prosecution.

Notes

- (a) Applications for critical worker travel approval relating to air and sea links (individuals directly involved in maintaining the Islands' air and sea links) should be made directly to Guernsey Ports Critical Worker Panel using the e-mail address portcriticalworker@gov.gg.
 - Applications may also be made through the States of Guernsey's Population Management Office at criticaltravel@gov.gg or 01481 715790.
- (b) Should your response to any of the questions change between submitting the form and arriving on island, you must inform the Guernsey Ports Critical Worker Panel and/or Population Management Office immediately at portcriticalworker@gov.gg and/or criticaltravel@gov.gg.
- (c) Please note that this application does not fulfil your requirements under the Population Management Law, and anyone living or working in Guernsey requires a valid permit to do so.
- (d) Please note that your details may be passed to the Guernsey Border Agency for enforcement purposes.
- (e) You will be contacted by email with a decision.