Health Questionnaire	
Site & Environmental Standard	Version number 2.0
Visitor & Contractor Requirement	Date of Issue:
Originated by:	Authorised by:

To be completed by all visitors / contr	acto	rs to t	he	site intending to enter production	areas.	
ame:				Company		
Site Contact(Pe	rson	to be V	/isit	ed)		
Purpose of Visit						
You are entering an agricultural production requirements (please circle Y if Yes, N if N	-	emises	s an	d are requested to comply with the fo	ollowin	ıg
In the last month have you travelled outsi	de Zi	mbabv	we?	Y		
If so, to where ?						
Have you or any of your family, suffered from any COVID-19 Symptoms:				Have you or any of your family, suffered from any of these Non- COVID-19 conditions:		
General Flu symptoms	Υ	N		Septic infections of the ear, nose or	Υ	N
Fever, high temperature	Υ	N		throat?	'	'`
Dry cough	Υ	N	1	Skin condition e.g. dermatitis,	Υ	N
Running nose	Υ	N		rashes, or boils		
Sore throat	Υ	N		Typhoid, Cholera or Dysentery	Υ	N
Shortness of breath	Υ	N		If "yes" to any of above have you	Υ	N
Stomach upset (with or	Υ	N		received medical clearance		
without diarrhoea, nausea or vomiting)	•			Do you have any cuts or abrasions?	Υ	N
 DO NOT shake hands or fist tap of the heart, node Social Distancing: maintain at lea 	omply ising or elbo lding, st one elbow	y on everage to solution wave of the contract of a part of the contract of the	on no; insome or some	nust be done on every entry to the prostead use other form non-touching grealight bow. tre from the next person. r tissue, DO NOT Cough or Sneeze into	oductio eetings	on areas
<u>Confirmation</u>						
Visitors Signature	•••••	•••••		Date	•••••	
Site Authorisation						
Host Signature			••	Date	•••••	

Disclaimer: Having taken the precaution to advise the recommended standard hygiene practices, in the face of a pandemic, the CFU, the farm management, or farm owner cannot be held liable for any instances of Covid-19 on farm as a result of following these recommendations.