

**ATTESTATION FORM**

The Center for Disease Control (CDC) recommends that you are fully vaccinated before travel. The CDC also recommends that if you travel and are not fully vaccinated that you get tested within 3-5 days after travel **AND** stay home and self-quarantine for a full 7 days after travel.

I have read the disclosure pertaining to my request to travel.

I \_\_\_\_\_ attest that **I have been** fully vaccinated

I \_\_\_\_\_ attest that **I have NOT been** fully vaccinated

Please note:

If you are not fully vaccinated, then you must test negative less than 3 days before your travel and test negative after your travel has concluded. You must also quarantine for seven (7) days.

Print your name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**THIS DOCUMENT IS AN INTEGRAL PART OF YOUR TRAVEL APPROVAL. PLEASE UPLOAD TO CHROME RIVER WITH OTHER DOCUMENTATION.**