International Student Quarantine Plan



Last updated: January 7, 2021

Personal Information	
Name (first, last):	Country of Origin:
Passport Number:	Home Address:
Date of Birth (yyyy/mm/dd):	
Arrival Information	
Arrival Date:	Port of Entry into Canada:
Arrival From:	Arrival By (airline name, flight #):
Quarantine Plan	
Quarantine site (name and address of homestay, hotel or accommodation provider):	
I confirm that the following are provided by my quarantine site:	
☐ Transportation to quarantine site ☐ 3	3 meals/day delivered to my room
☐ Access to needed toiletries, linen, cleaning su	ipplies, etc.
☐ I confirm that I will not be living with vulnerable persons or in shared accommodation during the period of mandatory quarantine upon entry.	
☐ I confirm that I am entering Canada with medical insurance that provides coverage for COVID-19 during the period of mandatory quarantine upon entry.	
☐ I confirm that I have access to sufficient funds to cover any and all additional COVID-19-related costs, including testing if required.	
Commitment to this Plan	
I, [STUDENT NAME], confirm that I understand the importance of the quarantine procedure upon arrival in Canada, and will follow all criteria provided in this document, as well as all requirements provided by the Government of Canada, for a full 14 days.	
Signature:	Date: