

Confirmation of Self-quarantine (E-9)

අදාළ කොටුව ලකුණු කරන්න vacation workplace change

Name S. Sanjeewa Prasanna	Date of Birth(MM/DD/YYYY) 04/05/1987
Nationality Sri Lankan	Passport No. M3185249
Flight No. KE 368 ගුවන් ගමන් ප්‍රවේශ පත්‍රය වෙන් කරගත් පසු පුරවන්න	Date of Arrival(MM/DD/YYYY) 05/25/2020 ගුවන් ගමන් ප්‍රවේශ පත්‍රය වෙන් කරගත් පසු පුරවන්න
Address in Korea (address of quarantine residence for 14days) ලිපිනය කොරියන් භාෂාවෙන් පුරවන්න	Name & Cell phone No. of employer (or protector) ආයතනයේ නම, ආයතනික ප්‍රධානියාගේ නම කොරියන් භාෂාවෙන් පුරවන්න 0082 10 48572693
Cell phone No. in Korea අයදුම්කරුගේ කොරියාවේ දුරකථන අංකය 0082 10 25878952	Contact No. අයදුම්කරුගේ ලංකාවේ දුරකථන අංකය 076 6587250

<Note>

Alien Registration Number : 89315059782313

(විදේශ අනන්‍යතා අංකය වෙනම ලියා සටහන් කරන්න)

In response to the global COVID-19 outbreak, as of 00:00 April 1st, 2020 (arrival time), the Republic of Korea requires all inbound travelers to be subject to self-quarantine or facility quarantine.

Foreign workers with E-9 visas should complete and submit this confirmation to the government of the Republic of Korea. If the person fails to submit the agreement or do not agree with all categories below, the government may deny entry in accordance with the 『Immigration Act』 , 『Quarantine Act』 , etc.

<Self-quarantine> I, agree to be quarantined at “a residence in the Republic of Korea” for 14 days after entry, in accordance with Article 42 of the 『Infectious Disease Control and Prevention Act』 , Article 16 of the 『Quarantine Act』 , etc.

Agree

Disagree

<Departure Order> I, in compliance with the instructions of the government of the Republic of Korea, agree to fulfill 14 days of self-quarantine and agree to unconditionally abide by the government measures including departure orders, if I fail to follow through or the government judge the quarantine residence is unsuitable to stay.

Agree

Disagree

I apply the self-quarantine confirmation as I have suitable self-quarantine residence for 14days after entry.

Date of apply (MM/DD/YYYY)

Applicant

(Signature)

0000 EPS Center

I confirm the above applicant has self-quarantine residence for 14days after entry by the employer(protector).

Date of confirm (MM/DD/YYYY)

Confirmor [Representative of 00 EPS Center]

(seal)