

## 'Health Declaration Form' User Guide

- 1) Declaration on diseases / conditions – Must declare for all diseases / conditions and tick (√) under the 'YES' column or 'NO' column that you are diagnosed with.

**For example:**

ITEMS	SELF		IF NO, PLEASE STATE	IF YOU HAVE SOUGHT CONSULTATION FOR ANY OF THE LISTED DISEASES/CONDITION, YOU ARE REQUIRED TO SUBMIT YOUR MEDICAL HISTORY/REPORT FROM YOUR TREATING PHYSICIAN TO EDUCATION MALAYSIA GLOBAL SERVICES (EMGS) PANEL CLINIC/UNIVERSITY HEALTH CENTRE.
	YES	NO		
Tuberculosis	√			
Hepatitis B	√			
Hepatitis C	√			
HIV	√			
Drug use/abuse of:				
1. Opiates	√			
2. Cannabinoids	√			
3. Amphetamine	√			
4. Methamphetamine	√			
Sexually Transmitted Diseases	√			
Congenital or Inherited Disorder	√			
Cancer	√			
Epilepsy	√			
Psychiatric Illness	√			
Other illness		√	Diabetes	

- 2) Date – Must be filled in dd/mm/yyyy format i.e. 20/06/2019
- 3) Name of Applicant – Must be the same as indicated in the passport **as per MRZ (Machine Readable Zone) format** which is located at the bottom page of the passport photo page.
- 4) Applicant's Signature is required.
- 5) Applicant's Passport Number – Must be the same as indicated in the applicant's passport copy submitted for Visa Approval Letter (VAL) application.