



COVID-19 (CORONAVIRUS) RECOVERY QUESTIONNAIRE
(To be completed by Proposed Life)
SOAL SELIDIK PEMULIHAN COVID-19 (CORONAVIRUS)
(Untuk dilengkapkan oleh Hayat Yang Dicadangkan)

Proposed Life Assured : _____
Hayat Dicadangkan : _____

Proposal/Policy No. : _____
No. Cadangan/Polisi : _____

Please answer the following questions with as much detail as possible:
Sila jawabkan soalan-soalan berikut dengan seberapa teliti yang mungkin:

1. When did you diagnose with SARS-CoV-2 / Covid-19?
Bilakah anda didiagnosis SARS-CoV-2 / COVID-19?

2. Why did you receive a Covid-19 test? (Please tick accordingly)
Mengapakah anda dikehendaki menjalankan ujian Covid-19? (Sila tandakan yang berkenaan)

Had symptoms / was ill / Ada simptom / tidak sihat

Had exposure to someone with known Covid-19 infection, but had no symptoms /
Terdedah kepada seseorang yang dijangkiti Covid-19, tetapi tiada simptom.

As part of a general screening/testing program, but had no symptoms /
Saringan umum/program ujian, tetapi tiada simptom

Others (Please provide details) / Lain-lain (Sila nyatakan dengan terperinci)

3. Upon the diagnosis of SARS-CoV-2 / Covid-19, where were you been placed for management? (please select the relevant):
Setelah didiagnosis SARS-CoV-2 / Covid-19, dimanakah anda ditempatkan untuk pengawasan? (sila tandakan yang berkenaan):

Hospital admission is required (Please answer Question 4 to 8 if this is selected) /
Perlu diwadkan di hospital (sila jawab Soalan 4 hingga 8 jika ini ditandakan)

Quarantine center (Please answer Question 5 to 8 if this is selected and provide a copy of Discharge note and release letter from Kementerian Kesihatan if applicable) /
Pusat Kuarantin (sila jawab Soalan 5 hingga 8 jika ini ditandakan dan sertakan nota discaj dan borang pelepasan dari Kementerian Kesihatan jika berkaitan)

Home quarantine (Please answer Question 5 to 8 and provide a copy of Release letter from Ministry of Health if applicable) /
Pengawasan dan pemerhatian di Rumah Kediaman (sila jawab Soalan 5 hingga 8 jika ini ditandakan dan sertakan borang pelepasan dari Kementerian Kesihatan jika berkaitan)





7. Do you have any pending or recommended follow up appointments or tests related to your Covid-19 diagnosis?

Adakah anda mempunyai temu janji yang akan datang ataupun disyorkan untuk rawatan susulan atau ujian yang membabitkan diagnosis Covid-19?

Yes/ Ya;

No/ Tidak

If 'Yes', please list dates and tests: / Jikalau 'Ya', sila nyatakan tarikh dan jenis ujian yang dikehendaki

8. If employed, have you been certified to return to work on unrestricted and full capacity basis?

Jika bekerja, adakah anda disahkan kembali bekerja tanpa syarat dan berkapasiti penuh?

Yes/ Ya;

No/ Tidak

If 'No', please provide details: / Jikalau 'Tidak', sila nyatakan dengan terperinci:

DECLARATION / PENGAKUAN

In connection with my application for insurance/reinstatement of my lapsed life policy, I have been informed by the Company in writing (as per the proposal form or reinstatement application form) about my duty of disclosure which I have fully understood. Hence, I hereby confirm that I have answered all questions asked in this form fully and accurately. I believe that the answers given will be relied upon by the Company for underwriting my insurability for insurance cover.

Sehubungan dengan permohonan saya untuk insurans/pengembalian semula polisi hayat saya yang sudah luput saya telah dimaklumkan secara bertulis (melalui borang cadangan atau borang permohonan pengembalian semula) mengenal kewajipan pendedahan saya dan saya dengan sepenuhnya memahami kewajipan tersebut. Saya dengan ini, mengesahkan bahawa saya telah menjawab semua soalan yang ditanya, di dalam borang ini dengan lengkap dan tepat. Saya percaya bahawa jawapan yang diberikan akan digunapakai untuk manaja jamin kepentingan boleh insurans saya.

Name :

Nama : _____

Signature :

Tandatangan : _____

NRIC No. :

No. K.P. : _____

Date :

Tarikh : _____

Note: This form is a bilingual form and should there be any dispute in the interpretation, the English Text Version shall prevail.
Nota: Borang ini adalah borang dwibahasa dan sekiranya timbul sebarang pertikaian terhadap tafsiran, versi Bahasa Inggeris akan digunakan.