

ALERT LEVEL 3 – CONTACT TRACING FORM

Completed for the week ending:

WORKER/VISITOR INFORMATION	
Full name	
Company name	
Mobile number	
Alternative telephone number	
Residential Address	

1.YOUR TEAM BUBBLE – who have you been working with?		
NAME	MOBILE NUMBER	SAME COMPANY?

Please list any other companies in your work bubble:

2.YOUR SOCIAL BUBBLE – who have you been socialising with		
NAME	MOBILE NUMBER	SAME RESIDENCE?

Please list any other residential addresses in your social bubble:

3. WORK SITES YOU HAVE VISITED IN THE LAST 14 DAYS			
SITE ADDRESS	SITE CONTACT	MOBILE	DATE AT SITE

4. OTHER PLACES YOU HAVE VISITED IN THE LAST 14 DAYS	
ADDRESS/LOCATION	DATE OF VISIT

OTHER COMMENTS:

PLEASE NOTE:

Please list any information that does not fit on this form on a separate bit of paper.

If a person at a worksite that you have been working on is either suspected to have Covid-19 or come into contact with a person who has been identified as a probable case of Covid-19 then this information must be provided to your company and the site manager. It will need to be passed through by them to the Ministry of Health for contact tracing purposes.