



Conditions of travel during Solomon Islands State of Emergency

Name/s: _____ Date of travel: _____

Please complete the below form and return it to Apt.bne@flysolomons.com prior to your flight departure.

Entry conditions to the Solomons

Passports/Visa entry to Solomon Islands:

- | | Yes | No |
|---|--------------------------|--------------------------|
| 1. Are you a Solomon Islands citizen?
If yes, proceed to Conditions to Exit Australia. | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Are you a foreign national? If so, have you received Prime Minister's Office approval for entry?
This is required regardless of your visa category. | <input type="checkbox"/> | <input type="checkbox"/> |

Conditions to Exit Australia:

- | | | |
|--|--------------------------|--------------------------|
| 1. Are you an Australian citizen or permanent resident? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. If yes, have you received Border Force exemption to exit?
You will not be allowed to leave Australia without this. | <input type="checkbox"/> | <input type="checkbox"/> |

Medical questions:

- | | | |
|---|--------------------------|--------------------------|
| 1. Have you completed the Pre-Departure Questionnaire ?
Must be emailed at least 5 days prior to departure to NHEOC_REPAT@moh.gov.sb . | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Have you sent your results from the required COVID-19 PCR tests with the Pre-Departure questionnaire?
Email your final test taken no more than 72 hours prior to departure as soon as results are received. | <input type="checkbox"/> | <input type="checkbox"/> |

Instructions on conduct:

- | | | |
|--|--------------------------|--------------------------|
| 1. Have you completed the Instructions on Conduct form ?
It must be signed and emailed to NHEOC_REPAT@moh.gov.sb
Also keep a printed hard-copy with you for collection on arrival. | <input type="checkbox"/> | <input type="checkbox"/> |
|--|--------------------------|--------------------------|

Hotel accommodation:

- | | | |
|---|--------------------------|--------------------------|
| 1. Have you booked your Honiara quarantine accommodation ?
Please confirm which hotel you have booked at: _____
Please confirm how many rooms your travel party need: _____ | <input type="checkbox"/> | <input type="checkbox"/> |
|---|--------------------------|--------------------------|

Ticketing conditions: Normal ticketing conditions apply including change and no-show fees.

By signing this form, you confirm you have completed the above requirements, take full responsibility for completion and accept all travel conditions.

Signature: _____ Date: _____