



*Commonwealth Healthcare Corporation*  
Commonwealth of the Northern Mariana Islands  
1 Lower Navy Hill Road Navy Hill, Saipan, MP 96950



The CNMI Health Official is charged with protecting the health of all residents in the CNMI. During this pandemic time, the CNMI employs a data driven and laboratory testing approach to ensure that SARS-COV-2 is not transmitted within the CNMI community.

As highlighted on the arrival registration portal, CNMI has implemented a stringent quarantine criterion for travelers. No traveler is exempt. All travelers are quarantined for some duration. What length of duration of quarantine is determined by the applicant's information, strength of justification, and assessment of the critical nature of work.

While travelers may have multiple entry requests, approval of one request does not imply automatic approval for future requests. Each application for entry into the CNMI for essential work or modified quarantine is reviewed by the CNMI Health Official.

CNMI, while recognizing CISA categories, has established a local process to consider modified quarantine for certain essential work needs critical for CNMI. Simply being in a CISA category should not be perceived as a reason to be exempted from our local procedures nor does it confer "approved essential worker" for the CNMI.

After a negative result is received from SARS-COV-2 testing on arrival, you may be approved to self-quarantine at own lodging with limited movement and barred from attending any form of congregated setting (restaurant, bars, church, meetings, etc.). In addition, we expect adherence to CDC's 3W guidelines (wearing a mask, washing, and watching distance from others).

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P.O. Box 500409 CK, Saipan, MP 96950  
Telephone: (670) 236-8201/2 FAX: (670) 233-8756

As a traveler to the CNMI, I am acknowledging, that as part of the approval process to enter the CNMI for essential work, I will comply with the required prevention and quarantine measures during this visit to CNMI.

**Traveler to review and initial each:**

I acknowledge that due to my modified quarantine release, I may be required to comply with additional testing.

I acknowledge that I will limit my movement while on island to only areas listed in “**1A or 1B**”:

**1A** \_\_\_\_\_ **1B.** \_\_\_\_\_

I acknowledge that I will not visit restaurants or bars or other establishments for dining in.

I acknowledge that I will adhere to the practice of 3Ws at all times while on island, including at my work location or my place of lodging (approved in “**1A or 1B**”)

I acknowledge that my picture and arrival information may be shared with the CNMI COVID-19 Task force for active surveillance.

I acknowledge that I will comply will surveillance requirements that will be conducted by the CNMI Task force or the CHCC.

Traveler's Name: \_\_\_\_\_

Traveler's Employer: \_\_\_\_\_

Date of arrival: \_\_\_\_\_

Date of departure: \_\_\_\_\_

\_\_\_\_\_  
Signature of Traveler

\_\_\_\_\_  
Date Signed

-----DO NOT WRITE BELOW THIS LINE-----

**CNMI Health Official Review**

Traveler's Mandatory Declaration Form confirmation ID#: \_\_\_\_\_

Recommend for essential/critical work

Not recommend for essential/critical work: Provide reason for not recommending:

\_\_\_\_\_

Esther L. Muña

CNMI Health Official: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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