



FULLY VACCINATED 14 DAYS BEFORE DEPARTURE TRAVEL TO CANADA AND QUARANTINE REGULATIONS

If your vaccination status is different from above, please complete another quarantine plan that best applies to you.

This form is fillable. Please type in directly on the form. Do not print the form, then handwrite your answer and then scan the document.

Your vaccination status:

Initial to confirm your vaccination status. Choose the option that best applies to you.

_____ I **have received** the full dose of an approved COVID-19 vaccine by the Government of Canada or a combination of accepted vaccines in the last 14 days.

**Approved vaccines by the Government of Canada:*

- Pfizer-BioNTech (Comirnaty, tozinameran, BNT162b2) – two doses
- Moderna (mRNA-1273) – two doses
- AstraZeneca (Vaxzevria, AZD1222, Covishield) – two doses
- Janssen (Johnson & Johnson) - single dose

COVID-19 Recovery Status:

Initial to confirm the option that best applies to you.

_____ I **have not contracted nor recovered** from COVID-19 in the last 14-90 days.

Connecting flight to Halifax Nova Scotia: put "TBC" if you're waiting for your flight confirmation.

_____ I have a direct flight to Halifax, Nova Scotia.

_____ My connecting flight to Halifax is on the same day as my arrival in Canada.

_____ My connecting flight to Halifax is on a different day as my arrival in Canada.

Note: if your connecting flight is on a different day as your arrival in Canada, you **MUST** book an overnight hotel stay in your port of entry. Please send us proof of your hotel booking.

Before departure:

1. Take a COVID-19 molecular test (PCR test) 72 hours prior to your departure to Canada.
2. Download the most recent version of the [ArriveCAN app](#) and complete the information related to your travel, quarantine plan, and vaccination details.
3. Check that your proof of vaccination meets the [documentation requirements](#).
4. Apply to enter Nova Scotia by completing the [NS Safe Check-in Form](#).
5. For students who will live on-campus: [Apply for MSVU on-campus residence](#).
6. Take a screenshot of your current course registration through the EllucianGo mobile app or on the [MyMount](#) website.

7. Request for your [Confirmation of Enrolment Letter](#) from MSVU Registrar's Office.
8. Make sure that your medical exam is valid (*if applicable*). If you were required to provide the results of your medical exam for the purpose of your study permit application, please be sure that you travel with valid results of your medical exam.
Note: a medical exam is only valid for 12 months.

IMPORTANT: Before traveling you **MUST** read the following:

1. [MSVU International COVID-19 FAQ page](#).
2. [Preparing for your Travel to Canada](#)
3. [Arriving in Canada](#)
4. [Arriving in Nova Scotia](#)

Information on these pages will help you complete the MSVU Quarantine Plan and will prepare you for your travel to Canada.

To participate in MSVU's Quarantine Plan, you must complete this form and submit it, along with the supporting confirmation documents to international@MSVU.ca

We will only sign your MSVU Quarantine Plan after receiving the following documents:

1. Proof of course registration.
2. Conditional approval to enter Nova Scotia.
3. Flight tickets.
4. Completed and signed MSVU Quarantine Plan. Please read and fill out the following pages very carefully to avoid delays. *Please submit your completed plan 5 days before you travel to Canada.*

Once your form has been reviewed, we will sign it and return it to you to present at the port of entry as your quarantine plan.



MSVU Quarantine Plan

PERSONAL INFORMATION:

Legal name as shown on passport: _____

MSVU student number: _____ | Personal email address: _____

Passport number: _____ | Date of birth (yyyy/mm/dd): _____

Country of origin: _____

Home address: _____

ARRIVAL INFORMATION: *put "TBC" if you're waiting for your flight confirmation.*

Arrival date: _____ | Port of entry into Canada: _____

Airline name: _____ | Flight #: _____

QUARANTINE LOCATION:

If the results of your arrival test for Covid-19 are positive, you will be required to quarantine for 14 days at an MSVU Approved Quarantine Location. Please choose one of the following options:

- _____ [Four Points by Sheraton](#), 1496 Hollis Street Halifax, NS B3J 3Z1
- _____ [Atlantica Hotel](#), 1980 Robie St, Halifax, NS B3H 3G5
- _____ [Hampton Inn by Hilton](#), 1960 Brunswick St, Halifax, NS B3J 2G7
- _____ [Homewood Suites by Hilton](#), 1960 Brunswick St, Halifax B3J 2G7
- _____ MSVU Residence, 166 Bedford Highway, Halifax, NS B3M 2J6.

*Only students who have signed a year long lease (Sept-April) will be permitted to quarantine in residence. Please provide confirmation from MSVU Residence that you have signed a lease for the 2021-2022 academic year.

_____ Private accommodation quarantine location.

*You must meet all the requirements for the private accommodation quarantine location. You are required to submit additional documents before you receive approval for this private accommodation quarantine plan.

_____ Air BnB short-term rental.

*You must meet all the requirements for the private accommodation quarantine location. You are required to submit additional documents before you receive approval for this private accommodation quarantine plan.

HEALTH INSURANCE:



Initial to confirm you have health insurance.

_____ I have arranged health insurance that includes COVID-19 expenses from the moment I enter Canada.

COVID-19 TEST:

Initial to confirm you understand.

_____ I will be scheduling a COVID-19 molecular test (PCR test) within 72 hours prior to my departure to Canada.

ACCOMPANYING PEOPLE:

_____ I am travelling alone.

_____ I am traveling with family. Specify number of family members and list all of their names and birth dates.

NOTE: Children under the age of 18 who are unvaccinated must quarantine for 14 days and a parent must be with them at all times.

_____ I am travelling with my Halifax roommate who will be quarantining with me. Specify their names.

For Private Accommodation and AirBnB only:

To have your private accommodations approved as a quarantine location, confirm the that the following requirements have been met:

_____ I have a signed lease or rental contract indicates my name (please attach your lease or rental contract). Please write the complete address of your private accommodation.

_____ I have a private bedroom and bathroom.

OR

_____ I do NOT have a private bedroom and bathroom. My roommates will quarantine with me if I test positive. The following people will be my roommates. Please list 1 person in each line. Include their full name, email address, and phone number. Please use legal names as shown on passport.

- 1. _____
- 2. _____
- 3. _____



- 4. _____
- 5. _____
- 6. _____

****Each person must provide written confirmation that they agree to quarantine with you in the event that you test positive for covid-19 upon arrival.** This information will be provided to a security company who will perform in-person checks to confirm compliance with quarantine requirements. This information will be destroyed once the quarantine period has passed.

****Please send the written confirmation from you and your family member(s)/roommate(s) (if applicable) with the appropriate file name along with this plan.**

____ I am in possession of a cell phone number that will work immediately upon arrival in Canada. Please enter your cell phone number here: _____.

____ I have arranged for food to be delivered to my quarantine location.

**** Please provide written confirmation from a person confirming that they will be providing you with three meals a day for 14 days or a screenshot confirming the creation of an [InstaCart account](#) (you will use this service to order groceries for cooking and other necessities).**

Documents you will send to us:

- Lease or rental contract with your name and complete address.
- Written confirmation from your roommate(s) (if applicable).
- Written confirmation from the person providing you 3 meals a day OR a screenshot confirming the creation of an InstaCart account (if applicable).

COMMITMENT TO THIS PLAN:

I, _____, confirm that the information I provided and confirmed are truthful. I will follow all requirements prescribed by the Government of Canada and the province of Nova Scotia, for a full 14 days. I understand the importance of the quarantine procedure upon arrival in Canada and any violation of the mandatory quarantine requirement can result in a:

- _____ \$750,000 fine;
- _____ up to 6-months of imprisonment;
- _____ and 1-year inadmissibility to Canada.

(Confirm that you understand each penalty by writing your initials.)

Signature: _____ Date: _____



MSVU CONFIRMATION

I confirm that the student has signed up for the quarantine plan that Mount Saint Vincent University has approved to meet the obligations of the Public Health Agency of Canada. In some cases, flight information might change depending on availability and cancellations.

Signature: _____ Date: _____

Printed name: _____ Position: _____

Phone (24/7): _____ Email: _____

Upon arrival in Canada:

1. Present all required documents.
2. Provide proof your negative COVID-19 molecular test (PCR test) taken within 72 hours prior to your departure to Canada.
3. Provide proof of vaccination.
4. Take a COVID-19 molecular test on arrival in Canada if randomly selected at the port of entry
5. Proceed to Nova Scotia. Note, you do not have to quarantine while waiting for your arrival COVID-19 test results.

Upon arrival in Nova Scotia:

1. Provide approval confirmation to enter Nova Scotia.
2. Supply any documentation that Nova Scotia requires to validate your entry into the province.
3. Complete MSVU Forms questionnaire, to inform us if you were randomly tested at the port of entry. This form will be emailed to you on your arrival date as listed on your quarantine plan.

*If you were randomly selected for testing, you must email international@msvu.ca a copy of your negative results from your arrival test.