



Australian Government

Department of Home Affairs

Health undertaking Kuwajibika Kiafya

Form
815 SWA
SWAHILI

Muhimu – Tafadhali soma maelezo haya kwa uangalifu kabla ya kukamilisha wajibu wako. Mara tu unapokamilisha wajibu wako tunashauri kwa nguvu kuwa uweke nakala kama kumbukumbu yako.

Nani anahitajika kutia sahihi kwenye waraka ya kuwajibika kiafya?

Kuwajibika kiafya yahitajika kwa waombaji ambao uchunguzi wa afya unaelekeza uwazi kwa kifua kikuu au hali za afya zinazohangaisha.

Kuwajibika kiafya ni kwa nini?

Kifua kikuu ni ugonjwa mkuu wa kuambukiza unaohangaisha watu hapa Australia. Kifua kikuu huweza kutibiwa na kusudi la kuwajibika kiafya ni kuhakikisha kuwa watu walio katika hatari kuu ya kusitawi kwa kifua kikuu kilicho kakamavu wanapokea msaa unaofuatiliwa unaofaa mara tu wanapokuwepo Australia.

Wakati wa uchunguzi wako, madaktari wetu waliridhika kuwa haukuwa na kifua kikuu kilicho kakamavu. Hata hivyo, sababu za hatari za kibinafsi zinamaanisha kuwa watu wengine wahitaji kufuatiliwa nchini Australia kuhakikisha ugonjwa hautokea.

Unaweza pia kupewa waraka wa kuwajibika kiafya kwa sababu ya hali nyingine ya afya kama vile Hepatitis B, Hepatitis C, VVU au Ukoma.

Kuwajibika kiafya ni mapatano yanayotengenezwa na Serikali ya Australia, ambayo inashurutisha wewe kuhudhuria wadhifa kwenye zahanati ya mamlaka ya afya kwa maana ya kufuatilia uchunguzi wa afya. Kwa kutia sahihi kwenye waraka wa kuwajibika kiafya unakubali pia kupitia matibabu yoyote au uchunguzi wowote ambao zahanati ya afya itaagiza.

Lazima uwasiliane na Huduma ya Kuwajibika kiafya (HUS) ndani ya wiki 4 za kuwasili Australia. Ikiwa viza lako liliidhinishwa ndani ya Australia, hauhitaji kuwasiliana na HUS kwani utakuwa tayari umesharejelewa kwenye zahanati ya afya ya Australia na Utoaji wa Huduma Tabibu ya Uhamiaji.

Nifanye nini sasa?

Ikiwa utakubaliana kufuata waraka wa kuwajibika kiafya, unafaa utie sahihi fomu hii na kuirudisha kwa ofisi ya Idara ya Mambo ya Nchi (Idara) inayoshughulikia maombi yako ya viza.

Ikiwa muombaji ni mtoto chini ya miaka kumi na sita (16) basi mzazi au mlezi anafaa kutia sahihi fomu 815.

Utapeleka nakala ya fomu hii. Tafadhali weka nakala kwani utahitaji wakati unapowasiliana na Huduma ya Kuwajibika Kiafya baada ya kuwasili nchini Australia.

Ikiwa nilitia maombi ng'ambo, nini hutendeka baada ya viza langu kuidhinishwa na nimewasili Australia.

Serikali ya Australia hutoa **bure** ukaguzi wa afya ili kupunguza hatari ya kuenea kwa kifua kikuu kwa jamii iliyokaribu, marafiki na watu waishio mahali pamoja. Ikiwa daktari anafikiria ni sharti, matibabu ya kifua kikuu yapangiliwa.

Ukumbusho: Ni kwa upendeleo wako kuufanya wadhifa upesi.

Ikiwa ulikamilisha uchunguzi wako wa afya kwa maana ya ombi hili nje ya Australia

Unapaswa kuwasiliana na Huduma ya Kuwajibika Kiafya (HUS) unapowasili nchini Australia. Lazima uwasiliane na HUS katika wiki 4 baada ya kuwasili. Kwa maelezo jinsi ya kuwasiliana na HUS angalia <https://immi.homeaffairs.gov.au/help-support/meeting-our-requirements/health/health-undertaking>

Ikiwa ulikamilisha uchunguzi wako wa afya kwa maana ya ombi hili ndani ya Australia

Kama unatia ombi la viza yako nchini Australia, unapotia sahihi kwenye fomu hii utakuwa tayari umesharejelewa kwenye zahanati ya afya ya Australia kwa mafuatilio yanapohitajika. Wewe lazima ufike tu kwenye zahanati ile kama ulivyoagizwa na Utoaji wa Huduma Tabibu ya Uhamiaji.

Nini hutendeka ikiwa hali ya afya itabadilika?

Ikiwa hali ya afya yako itabadilika, viza lako halitakuwa hatarini. Ni muhimu uhudhurie mamlaka ya afya husika ili kutimiza jukumu la kuwajibika kiafya. Idara inataka hali yako kufuzu kutibiwa.

Kwa nini nihudhurie zahanati ya afya?

Ni kwa upendeleo wako bora kutimiza matakwa yako ya kuwajibika kiafya. Ushirikiano wako na kuwajibika kiafya ni muhimu kusaaidia Serikali ya Australia kukulinda wewe, jamii yako pamoja na jamii za Australia.

Maelezo muhimu kuhusu faragha

Sheria ya Faragha 1988 ina Kanuni 13 za Faragha za Australia ambazo zinasimamia jinsi Idara inavyokusanya na kushughulikia habari za kibinafsi. Maelezo juu ya jinsi ya Idara inavyokusanya, kutumia na kufichua habari za kibinafsi kwa kazi kuu zake yanapatikana katika fomu ya 1442i *Notisi ya Faragha*. Habari zaidi juu ya michakato ya kushughulikia habari ya jumla ya Idara (ikiwa ni pamoja na fomu 1442i) inapatikana kutoka sera ya Faragha ya Idara katika tovuti kwa <https://www.homeaffairs.gov.au/access-and-accountability/our-commitments/privacy>

Tafadhali weka kurasa hii ya maelezo kama kumbukumbu yako

Kurasa hii imeachwa wazi kwa mapendeleo



Australian Government

Department of Home Affairs

Health undertaking Kuwajibika Kiafya

Form
815 SWA
SWAHILI

Please read the information about your health undertaking on page 1 of this form.

Please use a pen, and write neatly in English using BLOCK LETTERS.

Tick where applicable

Tafadhali soma maelezo kuhusu kuwajibika kiafya kwako katika ukurasa wa 1 (kwanza) wa fomu hii.

Tafadhali tumia kalamu ya wino, na andika kwa usafi kwa Kiingereza ukitumia HERUFI KUBWA.

Papasi mahali panapofaa

Your details

Maelezo yako

1 Your full name
Jina lako kamili

Family name
Jina la ukoo

Given names
Jina la kwanza

2 Date of birth
Tarehe ya kuzaliwa

DAY SIKU	MONTH MWEZI	YEAR MWAKA
/	/	

Office use only

HAP ID

ICSE Client ID

3 Do you have a passport?
Unayo pasipoti?

No

La/Hapana

Yes Give details

Ndio ▶ Toa maelezo

Passport number
Nambari ya pasipoti

Country of passport
Nchi ya pasipoti

Date of issue
Tarehe ya kuchapisha

DAY SIKU	MONTH MWEZI	YEAR MWAKA
/	/	

Date of expiry
Tarehe ya mwisho
ya matumizi

/	/	
---	---	--

Issuing authority/
Place of issue as shown
in your passport

Mamlaka ya kuchapisha/
Mahali pa kuchapisha
kama ioneshavyo kwenye
passpoti

Note: Most visa applicants will be required to hold a valid passport before they can be granted a visa. It is strongly recommended that the passport be valid for at least 6 months.

If you change your passport after you have been granted a visa you must notify the nearest Australian Visa Office or office of the Department.

WARNING: You will not be granted a visa without this information

Ukumbusho: Waombaji wengi watahitajika kuwa na pasipoti halali kabla ya wao kuidhinishwa viza. Inapendekezwa kwa nguvu kuwa pasipoti iwe halali kwa muda zaidi ya miezi sita.

Ikiwa utabadili pasipoti yako baada ya kuidhinishwa viza lazima ujulishe Ofisi ya Viza ya Australia iliyokaribu au Ofisi ya Viza ya idara.

ONYO: Hautaidhinishwa viza bila maelezo haya

4 Contact details in Australia

Note: Give full residential address, including postcode and telephone number where possible. If you do not know what your address in Australia will be, you must give the name and address of a person in Australia who will know how to contact you (for example, a relative, a friend, your employer or a staff member at your proposed study institution).

Maelezo ya Mawasiliano ndani ya Australia

Ukumbusho: Toa anwani kamili ya makao, pamoja na kanuni ya posta na nambari ya simu ikiwezekana. Ikiwa haujui anwani yako Australia itakuwa gani, lazima kutoa jina pamoja na anwani ya mtu aliye ndani ya Australia ambaye atajua jinsi ya kuwasiliana nawe (kwa mfano, jamaa, rafiki, mwajiri wako au mfanyikazi katika shirika la masomo lililopendekezwa).

Address

Anwani

POSTCODE KANUNI YA POSTA

Telephone numbers

Nambari za simu

Office hours

Masaa ya Ofisi

AREA CODE (KANUNI YA ENEO)

After hours

Masaa ya Baadaye

AREA CODE (KANUNI YA ENEO)

Mobile

Simu ya mkononi

--

5 Do you agree to the Department communicating with you by fax, email, or other electronic means?

Unakubaliana na idara kuwasiliana nawe kwa nukushi, barua pepe au kwa njia nyingine za elektroniki?

No

Hapana

Yes Give details

Ndio ▶ Toa Maelezo

Fax number

Nambari ya Nukushi

AREA CODE (KANUNI YA ENEO)

Email address

Anwani ya Barua Pepel

--

6 Intended duration of stay in Australia

Kusudia kipindi cha kikao Australia

permanent

kudumu

temporary

kwa muda ▶

Indicate length of stay in Australia

Dokeza urefu wa kikao Australia

months

miezi

weeks

wiki

days

siku

Client undertaking

Mteja kuwajibika

WARNING: Giving false or misleading information is a serious offence.

7 I undertake the following:

- (for applicants outside Australia) to contact the Health Undertaking Service within 4 weeks of my arrival in Australia;
- to report to the health clinic to which I am referred;
- to place myself under the health clinic's professional supervision and to undergo any required course of treatment, chest x-ray examination or investigation;
- to inform that health clinic each time I change my address in Australia throughout the period during which my health is being monitored;
- to inform that health clinic whenever I am about to leave Australia and to report upon my return, throughout the period during which my health is being monitored; and
- (for applicants outside Australia) to inform the Australian Visa Office where I lodged my application if, before my departure, I change my contact details.

Note: If you are an applicant under 16 years of age then a parent or guardian should sign this form.

ONYO: Kutoa maelezo ya uwongo au kukosesha ni kosa kubwa.

Nakubali kufanya mambo yafuatayo:

- (kwa waombaji nje ya Australia) kuwasiliana na Huduma ya Kuwajibika Kiafya ndani ya wiki 4 za kuwasili Australia;
- kufika kwenye zahanati ya afya ninayorejelewa;
- kujiteua mwenyewe chini ya usimamizi wa mtaalamu wa zahanati ya afya pamoja na kupitia mwenendo wowote wa matibabu, makadirio au uchunguzi wa eksirei ya kifua;
- kujulisha ile zahanati ya afya kila wakati unapobadilisha anwani yako hapa Australia muda wowote ule afya yangu inapokuwa inachunguzwa;
- kuijulisha ile zahanati ya afya wakati wowote ule nitarajia kuondoka Australia na kuripoti ninaporegea, wakati wote ambao afya yangu yachunguzwa; na
- (kwa waombaji nje ya Australia) kujulisha Ofisi ya Viza ya Australia mahali ambapo nilitia ombi langu ikiwa, kabla ya kuondoka, nabadilisha habari zangu za mawasiliano.

Ukumbusho: Ikiwa wewe ni mwombaji chini ya miaka 16 (kumi na sita) basi mzazi au mlezi anafaa kutia sahihi fomu.

Your
signature
Sahihi yako

Date
Tarehe

DAY SIKU	MONTH MWEZI	YEAR MWAKA
/	/	

If signing on behalf of a child under 16 years of age –
Name of parent or guardian

Ikiwa unatia sahihi kwa niaba ya mtoto chini ya miaka 16 (kumi na sita) –
Jina la mzazi au mlezi

Relationship
to child

Uhusiano
kwa mtoto

Consent for release of health information Rubusa ya kutolewa kwa maelezo ya afya

8 As a part of the health undertaking the Department and state and territory health authorities and the relevant health clinic need to release health information to each other. Information will only be released if it relates to the visa and will be strictly guided by the *Privacy Act 1988*.

I consent to the Department disclosing my personal information to state and territory health authorities and the relevant health clinic for the purpose of monitoring this health undertaking.

I consent to authorise the state and territory health authorities and the relevant health clinic to disclose to the Department:

- the result of the health examination that I will attend; and
- information about any follow-up treatment required.

Note: If you are an applicant under 16 years of age then a parent or guardian should sign this form.

Kama wajibu wa kuwajibika kiafya idara na mamlaka ya afya ya jimbo na ya wilaya na zahanati ya afya inayohusika yahitajika kutoa maelezo ya afya kati yao. Maelezo yatolewa ikiwa inahusiana na viza na itaongozwa kwa ukali na *Sheria ya Faragha 1988*.

Nakubali idara kufichua maelezo yangu ya kibinafsi kwa mamlaka ya afya ya jimbo na wilaya na zahanati ya afya inayohusika kwa kusudio ya kusimamia wajibu wa kuwajibika kiafya.

Nakubali kuamrisha mamlaka ya afya ya jimbo au ya wilaya na zahanati ya afya inayohusika kufichua kwa idara:

- matokeo ya makadirio ya afya ambayo nitahudhuria: pamoja na
- maelezo kuhusu matibabu yoyote ya kufuatilia yahitajika.

Ukumbusho: Ikiwa wewe ni mwombaji chini ya miaka 16 (kumi na sita) basi mzazi au mlezi anafaa kutia sahihi fomu.

Your
signature
Sahihi yako

Date
Tarehe

DAY SIKU	MONTH MWEZI	YEAR MWAKA
/	/	

If signing on behalf of a child under 16 years of age –
Name of parent or guardian

Ikiwa unatia sahihi kwa niaba ya mtoto chini ya miaka 16 (kumi na sita) –
Jina la mzazi au mlezi

Relationship
to child

Uhusiano kwa
mtoto

**You should keep a copy of your signed health undertaking.
Uweke nakala ya kuwajibika kiafya yako ya kusainiwa.**