



**Lander University Student Wellness Center**  
**Health Services**  
**Genesis Hall**  
**320 Stanley Ave CPO Box # 6045**  
**Greenwood, SC 29649**  
**P)864.388.8885 F)864.388.8456**

### **Tuberculosis Screening**

Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_ L# \_\_\_\_\_

Country of Citizenship \_\_\_\_\_

Please answer the following questions:

1. Have you resided or traveled to one or more of the countries or territories listed below for a period of three months or more?  Yes  No
  
2. Have you ever had a positive TB Test?  Yes  No

**If you answered YES to any of the above questions a TB blood test IS REQUIRED with in 72 hours of arriving to Lander University**

Afghanistan	China, Hong Kong SAR	Honduras	Namibia	South Sudan
Algeria	China, Macao SAR	India	Nauru	Sri Lanka
Angola	Colombia	Indonesia	Nepal	Sudan
Anguilla	Comoros	Iraq	Nicaragua	Suriname
Argentina	Congo	Kazakhstan	Niger	Tajikistan
Armenia	DR-Congo	Kenya	Nigeria	Thailand
Azerbaijan	DR-Korea	Kiribati	Niue	Timor-Leste
Bangladesh	Djibouti	Kyrgyzstan	N. Mariana Islands	Togo
Belarus	Dominican Republic	Lao PDR	Pakistan	Tokelau
Belize	Ecuador	Latvia	Palau	Tunisia
Benin	El Salvador	Lesotho	Panama	Turkmenistan
Bhutan	Equatorial Guinea	Liberia	Papua New Guinea	Tuvalu
Bolivia	Eritrea	Libya	Paraguay	Uganda
Bosnia and Herzegovina	Eswatini	Lithuania	Peru	Ukraine
Botswana	Ethiopia	Madagascar	Philippines	Tanzania-UR
Brazil	Fiji	Malawi	Qatar	Uruguay
Brunei Darussalam	Gabon	Malaysia	Republic of Korea	Uzbekistan
Burkina Faso	Gambia	Maldives	Republic of Moldova	Vanuatu
Burundi	Georgia	Mali	Romania	Venezuela
Côte d'Ivoire	Ghana	Malta	Russian Federation	Viet Nam
Cabo Verde	Greenland	Marshall Islands	Rwanda	Yemen
Cambodia	Guam	Mauritania	Sao Tome and Principe	Zambia
Cameroon	Guatemala	Mexico	Senegal	Zimbabwe
Central African Republic	Guinea	Micronesia	Sierra Leone	
Chad	Guinea-Bissau	Mongolia	Singapore	
China	Guyana	Morocco	Solomon Islands	
	Haiti	Mozambique	Somalia	
		Myanmar	South Africa	

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*\*TESTING ONLY TO BE DONE AT THE STUDENT WELLNESS CENTER– COST APPROXIMATELY \$100\*\***

**Return via email to [studentwellness@lander.edu](mailto:studentwellness@lander.edu)**