



P.O. BOX 325, 64 Regent Street, Belize City, Belize, C.A.

### Tourism Gold Standard (TGS) Application for Tour Operators

#### INSTRUCTIONS

- A. Prepare a COVID-19 plan which includes all documentation outlined in the 9-point checklist below
- B. Complete and sign this Interactive TGS application form
- C. Submit signed application form along with COVID-19 plan to [qualityassurance@belizetourismboard.org](mailto:qualityassurance@belizetourismboard.org)

Name of Tour Operator: \_\_\_\_\_

Tour Operator license number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Direct telephone number: \_\_\_\_\_

#### 1. Appoint a Tourism Gold Standard Program Manager

		YES	NO
1.	Provided contact information of appointed Tourism Gold Standard Program Manager and an alternate		
2.	Provided list of all duties and responsibilities of the Tourism Gold Standard Program Manager		
3.	Tourism Gold Standard Program Manager and alternate have participated in 5 BTB training sessions on the topics related to the TGS program		

[Click here for trainingschedule](#)



P.O. BOX 325, 64 Regent Street, Belize City, Belize, C.A.

## Tourism Gold Standard (TGS) Application for Tour Operators

### 2. Implement Monitoring & Reporting

		YES	NO
1.	Provided Employee temperature log template		
2.	Provided tour log template		
3.	Provided COVID-19 symptomatic log template		
4.	Provided Supplier temperature log template		
5.	Provided Employee shift log template		
6.	Provided reservations and guest log template		

[View sample logs here](#)

### 3. Ensure Social Distancing Protocols

		YES	NO
1.	Provided images of social distancing signage throughout the tour operator facilities- reception/information/check-in counters and other loading areas.		
2.	Provided images of the layout of reception/information/check-in counters and other loading areas with social distancing of 6ft spacing between guests/ groups.		



P.O. BOX 325, 64 Regent Street, Belize City, Belize, C.A.

**Tourism Gold Standard (TGS) Application for Tour Operators**

**4. Implement Enhanced Cleaning & Sanitization**

		YES	NO
1.	Provided cleaning time-log (includes time, employee conducting cleaning, area)		
2.	Provided disinfection time-log (includes time, employee conducting cleaning, area)		
3.	Provided checklists for high touch point of the different areas being cleaned i.e. office area, transportation vehicle/vessels, restroom, equipment, employee break room etc.		

**5. Develop a Response Plan**

		YES	NO
1.	Provided detailed response plan for dealing with symptomatic and an active COVID-19 case at office area or during a tour.		
2.	Familiarized staff of quarantine area at facility and park/site		
3.	Identified closest medical facility and procedure for transporting guest		
4.	Provided list and images of PPE for employees		
5.	Provided a clear procedure to inform and follow up with guest (includes informing Ministry of Health, Embassy/ Ministry of Foreign Affairs, Cruise Lines, Cruise Port & BTB)		
6.	Provided the procedures and documentation of the steps taken for cleaning and disinfecting facilities should case arise		
7.	Provided list and images of equipment to prepare for cleaning of COVID-19 such as: disinfectant sprayer, PPE, contactless thermometer, etc.		



P.O. BOX 325, 64 Regent Street, Belize City, Belize, C.A.

**BTB'S Tourism Gold Standard Program for Tour Operators**

**6. Ensure Clear & Consistent Communication**

		YES	NO
1.	Provided copy of the communication plans that will be shared with guests and employees		
2.	Provided list of platforms that will be used to reinforce the message to guests (Social media, booking process, etc.)		
3.	Provided images of COVID-19 best practices signage installed at office/ transportation vehicle/vessels		
4.	Provided images to confirm transition of communication material to either laminated or electronic communications (Tour option brochures, pricing lists, etc.)		

**7. Install Sanitization Stations**

		YES	NO
1.	Provided pictures of sanitization stations installed equipped with soap dispenser/ sanitizer gel, single-use towels/cloths		

**8. Deploy Technology**

		YES	NO
1.	Provided list and images of revised payment process that reduces physical contact		
2.	Provided list and images of revised check-in process that reduces physical contact		
3.	Provided list and images of any other use of technology to reduce physical contact		

**9. Implement a Training Plan**

		YES	NO
1.	Provided training schedule/ logs template		



BELIZE TOURISM BOARD

P.O. BOX 325, 64 Regent Street, Belize City, Belize, C.A.

**BTB'S Tourism Gold Standard Program for Tour Operators**

Declaration: I hereby certify that I have read the BTB enhanced health and safety guidelines. I declare that all information provided in this application is true, accurate and complete to the best of my knowledge. I have not withheld any information and understand any falsification is illegal and will disqualify this application.

Print Name of Gold Standard Program Manager: \_\_\_\_\_

Signature of Gold Standard Program Manager: \_\_\_\_\_

Date : \_\_\_\_\_  
(dd/mm/yyyy)

Print name of General Manager/ Owner: \_\_\_\_\_

Signature of General Manager/ Owner: \_\_\_\_\_

Date : \_\_\_\_\_  
(dd/mm/yyyy)