

EMPLOYEE HEALTH REPORTING AGREEMENT

FOR COVID-19 Response

People with COVID-19 have a wide range of symptoms reported – ranging from mild symptoms to severe illness. Symptoms may appear 2-14 days after exposure to the virus.

Employees should self-monitor daily for these COVID-19 symptoms:

- | | |
|--|-------------------------------|
| 1. Cough | 6. Sore throat |
| 2. Shortness of breath or difficulty breathing | 7. New loss of taste of smell |
| 3. Fever $\geq 100.4^{\circ}\text{F}$ | 8. Nausea |
| 4. Chills | 9. Vomiting |
| 5. Muscle Pain | 10. Diarrhea |

This list is not all inclusive. Other [less common symptoms](#) have been noted.

Employees must report if they are diagnosed with COVID-19:

- By a positive lab test, or
- Diagnosis from a health care provider (without lab testing)

Employees must also report COVID-19 Exposures:

- Living with a person that has been diagnosed with COVID-19, or
- Having close contact with a person that has been diagnosed with COVID-19

I understand the rules about health reporting and agree to:

1. Self-monitor prior to reporting to work each day.
2. Report symptoms, positive diagnosis or exposure to COVID-19 to the Person-in-Charge.
3. Follow the exclusions and/or restrictions that may be required of me.

I understand and agree to follow all best practices adopted by my business to prevent the spread of COVID-19 including but not limited to:

1. Communicate virtually whenever possible.
2. Limit in-person meetings and gatherings.
3. Practice frequent hand hygiene.
4. Wear PPE (cloth face coverings, masks, gloves, eye protection, etc.) required by my employer.
5. Maintain social distancing with other employees, customers, and clients.
6. Follow heightened cleaning and sanitizing of workspace and equipment.

Employee Name (please print) _____

Employee Signature _____ Date _____

Person in Charge Signature _____ Date _____