



EMPLOYEE SELF SCREENING

Please conduct a daily self-screening by answering the questions below based on whether you are vaccinated or not.

Vaccinated Employees (2 Self-Screening Questions)

Question #1:

Have you had any of the following symptoms within the last 10 days?

- a) Fever (at or over 100.4° F)
- b) Chills
- c) Cough
- d) Shortness of breath/difficulty breathing
- e) New loss of taste or smell

Question #2:

Are you currently under an isolation order?

A person is considered “fully vaccinated” against COVID-19 after two weeks or more have passed following the receipt of the second dose in a two-dose vaccine series (Pfizer-BioNTech or Moderna); OR one dose of a single-dose vaccine (Johnson and Johnson/Janssen).

Unvaccinated Employees (3 Self-Screening Questions)

Question #1:

Have you had any of the following symptoms within the last 10 days?

- a) Fever (at or over 100.4° F)
- b) Chills
- c) Cough
- d) Shortness of breath/difficulty breathing
- e) New loss of taste or smell

Question #2:

Are you currently under an isolation or quarantine order?

Question #3:

Have you had close physical contact (within 6 feet for a total of 15 minutes or more within a 24-hour period) with a person who is known to be infected with or suspected to have COVID-19 in the last 10 days?

If you answer “Yes” to any of the questions, you are not cleared to report to work in the office.

Contact your supervisor or office administration within the first hour of your work-shift for further instructions.