Please review this information prior to arriving to campus. Do not submit this form to anyone on campus.

COVID-19 Daily Self-Assessment Illness/Health Questionnaire – Offsite Use

Employees and students are required to complete this illness/health assessment each day prior to arrival to campus. This assessment is vital to ensure the health and well-being of the campus community.

| 1. | Are you experiencing any symptoms such as current or recent fever (100.4° or higher), new or worsening cough, new or worsening shortness of breath, respiratory illness, headache, muscle and body aches, sudden lack of taste or smell, or a sudden onset of unexplained gastrointestinal illness? |
|----|--|
| | Yes: |
| 2. | Since you last reported to campus, have you been in close contact with anyone who has been diagnosed with COVID-19? **CLOSE CONTACT is defined as: Being within approximately 6 feet of an individual who is currently positive for COVID-19 for more than 15 minutes in a 24-hour period. Close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with an individual who is positive for COVID-19 or having direct contact with infectious secretions from an individual who is positive for COVID-19. |
| | Yes: |
| 3. | Since you last reported to campus, have you been in close contact with anyone who may have COVID-19, but is yet to be confirmed? |
| | Yes: No: No: |
| 4. | Are you currently in living with – or, in close contact with anyone such as a family member who is experiencing symptoms or has been confirmed positive for COVID-19? |
| | Yes: |
| | <u>If you replied "YES" to any of the questions above</u> : You are not authorized to report to campus until you have contacted the Office of Human Resources and have received clearance. Please contact Human Resources at susan.hardie@chaffey.edu or 951-206-0640 for clearance. |
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