

Department of Chemistry Visitor COVID-19 Symptom Attestation for Working On-Site

Since your last day of work, or since your last visit to a University facility, have you experienced any of the following symptoms:

- A new **fever** (100.4 F or higher) or a sense of having a fever?
- A new **cough** that you cannot attribute to another health condition?
- New **shortness of breath** that you cannot attribute to another health condition?
- A new **sore throat** that you cannot attribute to another health condition?
- New **muscle aches** that you cannot attribute to another health condition or that may have been caused by a specific activity, such as physical exercise?
- New **respiratory symptoms**, such as sore throat, runny nose/nasal congestion or sneezing, that you cannot attribute to another health condition?
- New **chills or repeated shaking with chills** that you cannot attribute to another health condition?
- New **loss of taste or smell** that you cannot attribute to another health condition?

If you are sick or have one or more of the above symptoms:

- You must stay home or leave the UW facility at which you are working.
- Follow your department's procedure for calling out sick or requesting to work from home.
- Contact your health care provider for medical guidance.

I attest that prior to coming onsite on today's date that I do not have any of the above symptoms.

I have read and agree to the above statement.

I attest that I do not have any of the above symptoms.

Visitor location: _____

Date: _____

Signature: _____