**[Company Name]**

**Visitor Questionnaire: COVID-19**

Dear Visitor: The safety of our employees, supplier partners, customers, families, and visitors remains the Company’s overriding priority. In an effort to protect against the novel coronavirus known as SARS-CoV-2, which causes the illness known as COVID-19, the Company has implemented certain visitor protocols. As an interim measure, the Company asks all visitors, vendors, and other third parties to complete a health declaration prior to entering a Company facility. This form is completely voluntary; however, you will not be allowed access to the Company’s facility if you decline to respond. The data we collect will be used solely for purposes of preventing COVID-19 transmission and/or responding to a future COVID-19 diagnosis and will not be shared with anyone beyond those who need it to apply the Company’s workplace safety policies or as required by a public health authority or other such body. The data will be stored securely, and unless otherwise directed by a public health authority, we will destroy the data as soon as it is no longer needed for these purposes.

DATE OF VISIT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| Visitor Name: | Visitor Phone Number: |
| Visitor Organization: | Company Host: |

SELF-DECLARATION BY VISITOR:

1. In the past 14 days, have you been in close contact with anyone who has been diagnosed with COVID-19?

Yes \_\_\_ No \_\_\_

1. Have you been advised by a doctor, healthcare provider, or any public health authority to stay home or otherwise avoid contact with others?

Yes\_\_\_ No \_\_\_

1. Have you been free of fever, coughing, shortness of breath, or other respiratory symptoms associated with COVID-19 for at least 24 hours?

Yes \_\_\_ No \_\_\_

[IF REQUIRING TRAVEL DISCLOSURES]

1. In the past 14 days, have you traveled [INSERT AS APPLICABLE – SEE COMMENT ]?

Yes \_\_\_ No \_\_\_

]

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

**[Company Name]**

**Visitor Policy: COVID-19**

To help protect against the spread of the novel coronavirus SARS-CoV-2, which causes the illness known as COVID-19, effective immediately, the Company will ask all visitors, vendors, and other third-parties to complete a health declaration prior to entering a Company facility. Please see the attached declaration form and provide to visitors. Completing this form is voluntary, but visitors and other third-parties should be politely declined admittance to the facility if they decline to fill out a declaration form.

If the visitor answers yes to any of the questions on the form, contact [point of contact] for further guidance before permitting the visitor to enter the facility.

If you have any questions or concerns, or require additional information, please discuss them with your site facility manager and/or safety contact. Thank you for your understanding.