

Employee COVID-19 Self-Report Form

Agnes Scott College continues to monitor the spread of the coronavirus and its potential impacts to the college and to students. Updates, resources, and current information will be posted the ASC Coronavirus webpage: <https://www.agnesscott.edu/engaging-the-challenge-together//index.html>. Please refer to it for updates.

Our priority is protecting the safety and wellbeing of our students, faculty, and staff. Public health officials advise anyone experiencing symptoms of COVID-19 to stay home. If you are ill, please do not come to the college. Follow the established call-in procedure as determined by your supervisor. Use this form to self-report COVID-19 related diagnosis, exposure, self-isolation, or quarantine. Also report presumptive positive cases using this form.

If employees travel domestically, they should research the CDC travel advisory for their destination. Because risk assessments are changing rapidly, employees should share travel plans with their supervisors and check-in prior to returning to the office in the event new or revised advisories are issued.

Once completed, please email this form to pandc@agnesscott.edu.

Your Name (First name, Last name): _____

Agnes Scott Email address: _____

Phone Number: _____

Employee ID Number: _____

Employee Category:

Faculty

Staff

Student Worker

Contract Worker

Other: _____

Department and Office Location: _____

When were you last in the office or on campus? Please enter a date: _____

Any international or domestic travel within the last four weeks? If so, where?

Have you been diagnosed with COVID-19 by a health care provider?

Yes

No

Other: _____

Have you been instructed by a health care provider or public health official to self-isolate or quarantine because you are experiencing symptoms of COVID-19?

Yes

No

Other: _____

Which of the following describes your circumstances? (Check all that apply)

I am experiencing symptoms of COVID-19.

My healthcare provider advised that I self-isolate.

I am self-isolating because of recent travel.

I am immunocompromised and have questions about my health.

I have been tested, but I am waiting for my results.

I have tested positive for COVID-19.

I have not been diagnosed with COVID-19, and am not having symptoms. But, I would like to request support from the college at this time.

Other: _____

Has your supervisor approved you to work remotely?

Yes

No

Other: _____

If you are experiencing symptoms consistent with COVID-19, or had a known exposure or diagnosis, have you been within 6 feet of coworkers in the last 14 days? If so, please provide the names of those individuals to the best of your recollection. A People and Culture professional may contact you to learn of your interactions.

Please include any additional information here.