COVID-19: Checklist
Ask yourself these questions to reduce risk

To help ensure the safety of your employees, clients, and others, please use this checklist to help reduce the risk of spreading the coronavirus (COVID-19). If you are experiencing any of these symptoms, it is advised that you do not work on site and report any symptoms.

1. Are you currently experiencing any of the following symptoms?

☐ Cough
☐ Shortness of Breath
☐ Fever
☐ Difficulty Breathing
☐ No

2. In the last 14 days have you traveled outside of your home country?

☐ Yes    ☐ No

3. In the last 14 days have you traveled on a cruise ship?

☐ Yes    ☐ No

4. Have you been in close contact* with a probable or confirmed case of COVID-19?

☐ Yes    ☐ No

*Close contact meaning lived with a person or had prolonged contact with a person (within 6 feet for 10 or more minutes) who has been diagnosed with COVID-19, provided care for an individual who has been diagnosed with COVID-19 or had direct contact with (coughed or sneezed on) from an individual diagnosed with COVID-19.

If you answered Yes to any question, please do not work on site. Please report these symptoms to a manager and/or an employer as soon as possible.