

**Agency Name:** \_\_\_\_\_  
**COVID-19 Public Safety Pre-Duty Screening and Attestation**

**Purpose:** To prescreen individuals for illness prior to duty.

**Process:** Have employees or volunteers screen each other when reporting to work. Everyone will check-in and attest to the absence of symptoms at the start of shift. Individuals should not work if they have ANY of the following:

- a. Fever - whether measured or not
- b. Cough
- c. Body Aches
- d. Sore throat
- e. Difficulty Breathing

Have each individual take their temperature. If temperature is greater than 100.0°F, they should not work. To take a temperature, consider using disposable temperature strips or an infrared temperature device to reduce chances of cross-contamination. Document all temperatures below.

**Your signature below indicates your attestation that you have none of the above symptoms nor have a measured temperature.** If you cannot attest to being symptom free based on the above criteria, you will be sent home.

Crew Member 1

Temp \_\_\_\_\_ Signature \_\_\_\_\_

Crew Member 2

Temp \_\_\_\_\_ Signature \_\_\_\_\_

Crew Member 3

Temp \_\_\_\_\_ Signature \_\_\_\_\_

Crew Member 4

Temp \_\_\_\_\_ Signature \_\_\_\_\_

Crew Member 5

Temp \_\_\_\_\_ Signature \_\_\_\_\_