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Eau Claire Public Schools ~ 6190 West Main Street ~ Eau Claire, Michigan ~ 49111

COVID-19 Essential Employee Check-In Checklist

This checklist provides basic information It is not intended to take the place of medical advice, diagnosis, or treatment.

Employee Name: _____	Position: _____
Week of: _____	

1. Have you traveled within the last 14 days? Please check one: _____ YES _____ NO

Employee COVID-19 Checklist	2. What is your body temp?	3. Do you have any of the following symptoms: fever/feverish, chills, dry cough, difficulty breathing, or digestive symptoms such as diarrhea, vomiting, or abdominal pain? <i>*Check yes only if these are not typical symptoms for you (i.e. due to an underlying condition you already have).</i>	4. Have you had close contact with a confirmed/probably COVID-19 case?	Initial each day of work.
Monday		_____ YES _____ NO	_____ YES _____ NO	
Tuesday		_____ YES _____ NO	_____ YES _____ NO	
Wednesday		_____ YES _____ NO	_____ YES _____ NO	
Thursday		_____ YES _____ NO	_____ YES _____ NO	
Friday		_____ YES _____ NO	_____ YES _____ NO	

Practice these healthy habits to prevent the spread of viruses:

- Wash your hands with soap and warm water for 20 seconds. If unavailable, use an alcohol-based hand sanitizer with at least 60% alcohol.
- Avoid Touching your eyes, nose, and mouth with unwashed hands.
- Cover your nose and mouth with a tissue when you cough or sneeze, or cough/sneeze into your upper sleeve.
- Immediately throw away used tissues in the trash, then wash hands.
- Clean and disinfect frequently touched surfaces, such as doorknobs, handles, light switches, tables, toilets, faucets, sinks, and cell phones.
- Avoid touching common surfaces in public places – elevator buttons, door handles, handrails, etc. Use elbows or knuckles to push buttons when you do not have a tissue or sleeve to cover your hand or finger.
- Make sure others in your household or anyone you are regularly in close contact with, follow these precautions.

For more information, visit CDC's Resources for Businesses and Employers at

<https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/businesses-employers.html>

Employee Signature: _____ Date: _____

*This form must be completed daily and turned in at the end of the week, and be retained for 5 years.

