



## Visitor Self Declaration Form

Updated as of 3/19/2020

The safety of our employees, customers, families and visitors remains Rahr's overriding priority. As the coronavirus disease 2019 (COVID-19) outbreak continues to evolve and spreads globally, Rahr is monitoring the situation closely and will periodically update company guidance based on current recommendations from the Center for Disease Control and the World Health Organization.

To prevent the spread of COVID-19 and reduce the potential risk of exposure to our employees and visitors, we are conducting a simple screening questionnaire. Your participation is important to help us take precautionary measures to protect you and everyone in this building. Thank you for your time.

Visitor's Name:	Personal Phone Number (mobile/home):
Visitor's Company/Organization:	Name of Rahr Host:
Visiting Location:	

If the answer is "yes" to any of the following questions, access to the facility will be denied.

Self-Declaration by Visitor	
1	Have you had close contact (<6 feet) with or cared for someone diagnosed with COVID-19 within the last 14 days?  <input type="checkbox"/> Yes <input type="checkbox"/> No
2	Have you been in close contact with anyone who has exhibited cold or flu-like symptoms within the last 14 days?  <input type="checkbox"/> Yes <input type="checkbox"/> No
3	Have you experienced any cold or flu-like symptoms in the last 14 days (to include fever, cough, sore throat, respiratory illness, difficulty breathing)?  <input type="checkbox"/> Yes <input type="checkbox"/> No

Signature (visitor): \_\_\_\_\_

Date: \_\_\_\_\_

**Note: If you plan to be onsite for consecutive days, please immediately advise your Rahr host if any of your responses change.**

Access to facility (circle one):    Approved    Denied