# Non-employee COVID-19 Symptom Attestation for Working On-Site

**Since your last day of work, or since your last visit to a University facility, have you experienced any of the following symptoms:**

* A new **fever** (100.4 F or higher) or a sense of having a fever?
* A new **cough** that you cannot attribute to another health condition?
* New **shortness of breath** that you cannot attribute to another health condition?
* A new **sore throat** that you cannot attribute to another health condition?
* New **muscle aches** that you cannot attribute to another health condition or that may have been caused by a specific activity, such as physical exercise?
* New **respiratory symptoms**, such as sore throat, runny nose/nasal congestion or sneezing, that you cannot attribute to another health condition?
* New **chills or repeated shaking with chills** that you cannot attribute to another health condition?
* New **loss of taste or smell** that you cannot attribute to another health condition?

If you are sick or has one or more of the above symptoms:

* You must stay home or leave the UW facility at which you are working.
* Follow your department’s procedure for calling out sick or requesting to work from home.
* Contact your health care provider for medical guidance.
* Follow the guidance on the FAQ [What do I do if I feel sick?](https://www.washington.edu/coronavirus/#health) at the UW’s [Novel coronavirus & COVID-19 facts and resources webpage](https://www.washington.edu/coronavirus/).

This daily attestation is required every day you are on campus or in UW facilities.

By signing below, I attest that I have read the above statement and that I do not have any of the above symptoms.

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| --- | --- |
| Name: |  |
| Signature: |  |
| Date: |  |
| Supervisor/Sponsor: |  |