

SUNY ESF Coronavirus Questionnaire for Lab and Field Research Activities

PI Name: _____

Your Name: _____ Phone _____ Email _____

In order to safeguard the public and prevent community spread of the novel coronavirus, there are a few questions that all employees, students, volunteers and contractor personnel must answer prior to engaging in any research activities:

1. Do you have, or have you had, symptoms of acute respiratory illness or fever within the previous 14 days? Yes ____ No ____
2. Do you share a living residence with someone who has had symptoms of acute respiratory illness or fever within the previous 14 days? Yes ____ No ____
3. Do you share a living residence with someone who has had contact with anyone known to have COVID-19 or who has symptoms of acute respiratory illness or fever? Yes ____ No ____
4. Are you required by the NYS DOH to be under mandatory or self-quarantine? Yes ____ No ____
5. Have you, or anyone with whom you share a residence, traveled within the previous 14 days to areas of known COVID-19 cases, and spent time in public areas such as airports, airplanes, buses, etc., where social distancing has not practiced? Yes ____ No ____

**If any of your answers to any of these questions are "YES,"
you should not be present or working upon SUNY ESF property or engaging in
research activities.**

Please acknowledge your understanding of the aforementioned, by signing below. **Submit this completed form to Pat Henson (phenson@esf.edu).** If your information changes, please contact the SUNY ESF Office of Environmental Health and Safety at **(315)470-6896** or University Police at **(315)470-6667** to report the change.

Signed _____ Date _____

SUNY ESF appreciates your diligence in adhering to the social distancing protocols that have been recommended by the US CDC, and enacted under Executive Orders of the Governor of the State of New York, Andrew Cuomo.

Keep a copy of the questionnaire for your information and to self-report any changes.