



## **ROMAN CATHOLIC DIOCESE OF WORCESTER SELF-SCREENING & OFFICE REQUIREMENTS DURING COVID-19 PANDEMIC**

Please read the following requirements and sign below to confirm that you will strictly adhere to these requirements until further notice.

- ❖ When scheduled to work, I agree to take my temperature prior to my arrival at work, and if I have a temperature reading of 100°F or higher (which most often means a fever), I agree to stay at home and not go to work at any of our diocesan locations.
- ❖ If I feel ill, I agree to stay at home and not go to work at any of our diocesan locations.
- ❖ If I become ill while at work, I agree leave work immediately.
- ❖ If I have any symptoms of COVID-19, such as but not limited to a fever, cough or shortness of breath, I agree to stay at home and not go to work at any of our diocesan locations.
- ❖ If I develop any symptoms of COVID-19 while at work, such as but not limited to a fever, cough or shortness of breath, I agree to leave work immediately.
- ❖ When at work, I agree to wear a face covering or mask at all times.
- ❖ When at work, I agree to remain at least six (6) feet apart from others to the greatest extent possible.

I understand that my signature below confirms that I have read, understand and agree to the above requirements.

\_\_\_\_\_  
Employee's Printed Name

\_\_\_\_\_  
Job Title

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date