

## **Contact with COVID-19 Cases**

1. [NAME][SURNAME]: If you have had a positive COVID-19 swab test at any point during the pandemic, did you test positive after:	
	Contact with suspected COVID-19 case(s)
	No known contact with confirmed or suspected COVID-19 case(s)
	I have not had a positive COVID-19 swab during the pandemic
<b>2.</b> (if s	selected any of the first three options for Q1) Where do you think you may
have caught COVID-19? Please select all that apply	
	At home
	In someone else's home
	On public transport
	At work from a colleague
	At work from a customer/client/patient
	In your place of education
	At a shop for essential items
	At a shop for non-essential items
	At a hairdresser, barber, nail salon, or
	similar location
	In a healthcare setting
	Eating out in a restaurant, cafe, or canteen
	At a bar, pub, or club
	At a gym/indoor sports facility
	Other location