

New - Visitor Covid Symptom Check Questionnaire

Q1. Welcome to the UCSC Visitor COVID-19 Symptom Check Questionnaire.

No health related responses will be shared with anyone.

The campus COVID-19 Symptom Check Officer and the Workers' Compensation Office, as applicable, may review the "Not Cleared to enter UCSC facilities" certification for the purpose of COVID-19 exposure notification, contact tracing or Workers' Compensation claims, as applicable. Responses will be purged after 60 days. If you have chronic conditions (e.g., migraines) and experience symptoms in this screening identical to your usual symptoms, do not report those into this questionnaire. Any deviation from your usual symptoms must be reported.

After completing the questionnaire, a certificate indicating "Cleared" or "Not Cleared" will be emailed to you and, if applicable, to those you will meet with on site.

Click here to read more about the COVID-19 [Privacy Policy](#)

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Q2. Do you attest that you are in compliance with the UC COVID-19 Vaccination Program Policy?

The purpose of the [UC COVID-19 Vaccination Program Policy](#) is to facilitate protection of the health and safety of the University community, including its patients as well as its students, trainees, personnel and all other who work, live and or/learn in any of the University's locations or otherwise participate in person in University programs. It is intended to reduce the incidence of COVID-19 infection, disease, disability, and death.

- ☐ Yes, I am in compliance with the UC COVID-19 Vaccination Program Policy
- ☐ No, I am not in compliance with the UC COVID-19 Vaccination Program Policy
- ☐ Not Applicable

Q3. Name:

Q4. Email:

Q5. Phone Number:

Q6. Please indicate the building you will access today?

[Main Campus Region Map](#)

- Location: _____
- Region: _____
- Building: _____

Q7. Please enter Other building(s) you will access today, (if applicable).

(Enter name of building follow by a comma, (NA) for not applicable)

Q8. Are you meeting with specific USCS faculty, staff, or students?

☐ Yes

☐ No

Q9. Name of primary contact while visiting UCSC facilities today:

Q10. Email of primary contact:

Q11. Will you be meeting with other UCSC faculty, staff, or students today?

☐ Yes

☐ No

☐ Unpredictable

Q12. Name of second contact:

Q13. Email of second contact:

Q14. Have you experienced any of the following symptoms in the last 48 hours?

Do NOT report symptoms if either of the following statements is true:

- You have chronic conditions (e.g. migraines) and experience symptoms in this screening identical to your usual symptoms

OR

- You have consulted with a health care provider and they have cleared you for work.
- Any deviation from your usual symptoms that has not been cleared by a health care provider must be reported.
 - Fever or chills
 - Cough
 - Shortness of breath or difficulty breathing
 - Fatigue
 - Muscle or body aches
 - Headache
 - New loss of taste or smell
 - Sore throat
 - Congestion or runny nose (unrelated to seasonal allergies)
 - Nausea or vomiting
 - Diarrhea

☐ Yes, I DO have symptoms

☐ No, I DO NOT have any of these symptoms (except as excluded above)

Q15. Have you taken any medication for COVID-Like symptoms in the past 48 hours?

☐ Yes

☐ No

Q16. Within the previous 10 days, are you aware of being exposed to anyone who has been confirmed to have COVID-19? You can answer “No” if you are up to date with all recommended COVID-19 vaccines, including any booster dose(s) when eligible.

☐ Yes

☐ No

Q17. If you have had COVID-19 within the past 10 days, are you still in your isolation period?

☐ Yes

☐ No

Thank you for completing the survey!
