

Include any other relevant information.

West Virginia Department Of Transportation Division Of Highways

1900 Kanawha Boulevard East Charleston, West Virginia 25305



Coronavirus (COVID-19) Questionnaire

Employee Inform						
Employee Name		Address	Address			
 City	State	Zip	— Home Ph	one #	Email	
<u>Questions</u>						
1.Have you been	tested for Co	oronavirus (COVID-19)?	Yes	No		
If Yes, Please pr	ovide the da	te you were tested.				
If No, Skip to Q	uestion 3.					
2. Was your Coroi	navirus (COVI	D-19) test positive?	es No			
3. Date of exposure to Coronavirus (COVID-19)?				Proceed to Box Below		
	· ·		•	-	at state vehicles and equipment did you Include any other relevant information	
4. If Date of expos	sure is unkno	wn, identify potential exposi	ure date:		Proceed to Box Below	
	, ,	•		•	were in direct contact with. What state or to your potential date of exposure?	