

Parks Employees & Public:

Daily Health Screening for Entry to NYC Parks Buildings

You are being asked to answer this questionnaire in order to determine whether you are experiencing any symptoms that could be consistent with COVID-19. This is being done solely for the purpose of protecting the workplace from potential spread of the disease. Any results you get, and/or any directive you receive to stay home, does not constitute a diagnosis of COVID-19, nor are we advising whether you need to get tested or contact a physician. You can consult CDC and health department websites for guidance in that regard.

1. Have you experienced ANY of the following symptoms within the past 10 days: (a) a fever of 100.4 degrees F or greater; (b) a new cough; (c) new loss of taste or smell; OR (d) shortness of breath?
2. In the past 10 days, have you tested positive for COVID-19 from a throat, nose or saliva swab? (Not an antibody test via a blood sample)
3. In the past 14 days, have you been in close contact (within 6 feet for at least 10 minutes) with anyone who tested positive for COVID-19?
4. In the past 14 days, have you travelled internationally? Or have you returned from a state that was identified by New York State as having widespread community transmission of COVID-19 (other than just passing through the restricted state for less than 24 hours)?

If you answer “Yes” to one or more of the questions above, you are not allowed entry to any Parks facility today. If you are a Parks employee, you are not permitted to remain at work.

Select one of the following:

- I answered “No” to all questions
- I answered “Yes” to one or more questions

Print Name _____

Sign Name _____

ERN (City Employees only) _____

Date _____