

COVID-19 Worker Declaration Form

Prior to commencing each shift, all employees and subcontractors must complete this Declaration Form as required by Victorian Government. This is to ensure we are keeping our people safe and healthy, and minimising the risk of COVID-19 transmission at our workplaces.

Please read and complete the below:

Name: _____

Employer: _____

Tick yes or no to each of the following questions:

Yes No

- ☐ ☐ Are you waiting for COVID-19 test results where you were tested because of COVID-19 related symptoms?
- ☐ ☐ Have you been in contact with a confirmed case?
- ☐ ☐ Have you been directed to self-isolate or self-quarantine by DHHS or other authority?

If you answered YES to any of the above questions, you **must not** enter the workplace until advised by DHHS that you are released from isolation or quarantine.

Yes No

- ☐ ☐ Are you experiencing any COVID-19 related symptom (symptoms include, fever, cough, sore throat, shortness of breath, loss of sense of smell and/or taste.)

If you answered YES to the above, tell your employer and go home and get tested for COVID-19.

Getting to work

Carpooling to work with a person you don't ordinarily live with is currently prohibited by the Victorian Government, unless one of the people in the vehicle can't reasonably get to work another way. Failure to comply with this rule is an offence and penalties apply.

I confirm that I have read the above information and answered these questions to the best of my knowledge and understand this Declaration Form will be kept and provided to the Victorian Government if required.

Sign: _____

Date: _____