

APPENDIX A

Employee Pre-Travel Disclosure Form

This form must be submitted to Human Resources prior to any interstate or international travel..

First Name: _____ Last Name: _____

Home Address: _____

Home Phone #: _____ Cell Phone #: _____

Travel Destination: _____

Dates of Travel (Departure and Return): _____

Accommodation Type (family home, rental home, hotel): _____

Please answer the following questions by circling yes or no.

1. Will you be traveling to any area with clusters of COVID-19 or a high-risk state?
yes or no

2. Will you be traveling on a plane, train, bus or cruise ship? *yes or no*

3. Will you be visiting a nursing home, or hospital or other high-risk congregate setting?
yes or no

Signature

Date

Note – Providing false information on this Pre-Travel Disclosure Form may result in discipline or termination of employment.