If you are visiting a UCSC facility to attend an Arts Division event today and you do not have access to the online form, complete this UCSC Visitor COVID-19 Symptom Check Questionnaire prior to entering the facility.

1. Do you attest that you are in compliance with the UC COVID-19 Vaccination Program Policy?
   □ Yes, I am in compliance    □ No, I am not in compliance    □ Not Applicable

2. Please indicate the location you will visit today: *
   □ Theater Arts Center    □ Other Region/Building/Rm# _______________________________

*Denotes a required field

3. 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. 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)

4. Have you taken any medication for COVID-like symptoms in the past 48 hours? *
   □ Yes    □ No

5. 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

6. If you have had COVID-19 within the past 10 days, are you still in your isolation period? *
   □ Yes    □ No

Your Name* ___________________________ Email_________________________ Today’s Date_____

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Clearance Status

1. If NO to ALL questions: a. You are “Cleared to enter UCSC facilities.” b. The clearance is active for 1 day.
2. If YES TO ONE or more of the symptom questions:
   a. You are “Not Cleared to enter UCSC facilities.”
   b. The CDC recommends that you contact your medical provider, or go to your local Emergency Department if symptoms warrant.
   c. Do not enter UCSC facilities until you have consulted with a medical professional.

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