

STEELCASE VISITOR HEALTH SCREENING QUESTIONNAIRE

The health and safety of our employees, customers, families and visitors remains the top priority of OpenSquare and Steelcase. As the Coronavirus situation continues to evolve globally, we're asking you to complete this screening to help prevent the spread of or exposure to COVID-19. If you answer "yes" to any of the following questions, we respectfully request you reschedule your visit or request a virtual consultation. If you answer "no" to these questions and plan to proceed with your visit, please print this document and bring it with you.

Visitor Name:	Visitor Mobile/Home Phone Number:
Visitor Company/Organization	OpenSquare or Steelcase Host:
Facility Name:	
Planned date of Steelcase visit:	

SELF DECLARATION BY VISITOR	
1.	Have you returned from, or connected through, any of the countries listed below within 14 days of your visit to OpenSquare? Iran, Italy, Japan, Mainland China, South Korea? Yes No
2.	Have you 1) been diagnosed, 2) been in contact with someone who has been diagnosed or 3) been in contact with someone who may have been exposed (e.g. traveled to one of the countries listed above) with COVID-19 within 14 days of your visit to OpenSquare? Yes No
3.	Have you experienced any cold or flu-like symptoms (including fever, cough, sore throat, respiratory illness, difficulty breathing) within 14 days of your visit to OpenSquare? Yes No

Note: If you plan to be onsite for consecutive days, please immediately advise your OpenSquare or Steelcase host if any of your responses change.

Access to facility (circle: **APPROVED / DEFERRED**)