

CENTRAL OFFICE SUPERVISOR REPORTING SHEET

Employee Name: _____ Supervisor Name: _____

Division and Section: _____

Reporting Date: _____

INDICATE EVENT YOU ARE REPORTING

1. Employee is Experiencing Symptoms (Yes or No): _____ Date Symptoms Began: _____
2. Employee has been in Close Contact: _____ Date of Contact: _____
 - a. Workstation (Office or Cubicle): _____ Location: _____
 - b. Was Close Contact related to Home or Work: _____
 - c. List Staff in Close Contact with the Employee:

3. Employee has Tested Positive (Yes or No): _____ Date the Employee was Tested: _____
4. Employee was Last in the Work Location: _____ Date: _____
5. Employee has been Quarantined: _____ Dates of Quarantine: _____ - _____
6. Employee will be Teleworking or on Leave: _____ Status: _____

HOW TO CALCULATE QUARANTINE DATES

Each of the dates above would represent Day 0 and the 14 calendar days would start the following day.

Example 1: Date the Employee Tested Positive or Last Exposure: August 4.

Dates of Quarantine (Telework/Leave): August 5 through August 18.

The Employee is cleared to report to the work location on August 19 (or next scheduled day after that date.) Note: Calculations based on 10 Business Days/4 Weekend Days***

WHEN TO QUARANTINE/WHO SHOULD QUARANTINE

1. **When you have been in close contact with someone who has COVID-19.**
2. **What counts as close contact?**
 - You were within 6 feet of **someone who has COVID-19** for a total of 15 minutes or more.
 - You provided care at home to someone who is sick with COVID-19.
3. **Steps to take:**
 - Stay home for 14 days after your last contact with a person who has COVID-19
 - Watch for fever (100.4°F), cough, shortness of breath, or [other symptoms](#) of COVID-19