

Visitor's Health Declaration Form

The safety of our employees, suppliers, customers, families, and visitors remains Meadowlink Employment Services' overriding priority. To reduce the potential risk of exposure to COVID-19, visitors will not be permitted in our office or at our customer's work site unless it is for business-critical purposes. Those who will be visiting are asked to fill out this form and bring it with you. If any of the restrictions below apply to you or others in your party, we will ask that you do not enter our facility, or any workplace associated with Meadowlink Employment Services and work with your contact to establish an alternate method to connect.

Visitor Information

Name of Visitor: _____

Name of Company: _____

Contact Number: _____

Email: _____

Intended Date of Visit: _____

Purpose of Visit

Business Visit

Recruiting Interview

Personal Visit

Other

Are you with a Federal or Provincial Regulatory Agency?

Yes No If yes, please indicate the agency _____

Regulatory agency representatives are exempt from signing this form prior to entering a Menasha Corporation facility.

Other Information

Have you traveled to countries or states of emergency in the United States as identified by the [Centers for Disease Control and Prevention \(CDC\)](https://www.cdc.gov) within the last 30 days?

Yes No If yes, please provide details

Have you had close contact with someone who visited these locations over the past 30 days?

Yes No

Have you come into contact with someone with a suspected or confirmed case of COVID-19?

Yes No

Are you showing any flu symptoms? (e.g. fever, coughing, shortness of breath, sore throat)

Yes No

NOTE: All visitors, guests & Employees must comply with all workplace GMPs, Sanitation, and workplace Safety Standards

Thank you for your cooperation and understanding.