



PHASE 1

HEALTH QUESTIONS

1. Do you have symptoms such as, cough, sore throat, chills, shortness of breath, loss of taste or smell?
2. Are you awaiting test results to determine if you have COVID-19?
3. Are you under instructions to self-isolate or quarantine due to COVID-19?
4. Have you had contact with someone diagnosed with COVID-19 or awaiting test results?
5. Have you traveled to an area with a notably high concentration of COVID-19 cases?

For more information, visit: www.circuit5.org