

**Rowan University Campus**  
**Daily Contractor Screening**  
**Employee Form**

Date \_\_\_\_\_  
Project \_\_\_\_\_  
Company Name \_\_\_\_\_  
Employee Name \_\_\_\_\_  
Supervisor \_\_\_\_\_  
Which Rowan Campus Site \_\_\_\_\_

Are you scheduled to work at the jobsite on this date

Yes   
No

Do you have a fever of 100.4 degrees F

Yes   
No

Do you have any of the following symptoms not associated with an existing medical condition: shortness of breath, new cough, excessive chills, severe muscle pain, loss of taste or smell or new profound headache?

Yes   
No

In the last 14 days, have you traveled to or from a high risk COVID-19 state or country for personal reasons, other than work or school or have you been exposed to anyone known to be positive for COVID -19? (this excludes healthcare workers exposed while wearing recommended PPE)

Yes   
No

**If an individual contractor employee shows signs of COVID - 19 they should be removed from the jobsite immediately. Rowan's first priority is protecting the students and staff on each of our Campuses**

**Work Parameters for Contractors on Rowan Campuses**

Appropriate Masks are required to be worn as all times. This is an enforceable no tolerance policy required of all contractor employees

**Employees will get only one warning and a 2nd violaton the contractor employee will be permanently removed from the site**

6' social distancing shall be maintained as best as possible on the work sites

Rowan University Resource Page: <https://www.rowan.edu/returntorowan/>

Rowan Project Manager

Name \_\_\_\_\_  
Email \_\_\_\_\_  
Cell # \_\_\_\_\_