MLMW STAFF, VOLUNTEERS, RESEARCHERS, COUNCIL WORKER or CONTRACTOR

CORONAVIRUS (COVID-19) HEALTH QUESTIONNAIRE

We encourage each staff member, volunteer, researcher, Council worker or contractor to complete this questionnaire before starting any shift or visiting the Museum and to email or give your completed questionnaire to either of the MLMW shift managers, Kerrie Poliness 0419154265 or Treasurer, Tim Wellington 0447878933

This questionnaire should be read in advance, then completed and either physically left at the Museum registration desk or scanned or photographed and emailed to admin@livingmuseum.org.au in advance of visiting where it will be kept as a record should Covid -19 contact tracing be required.

Full name:	
Organisation (if not Living Museum):	
Date:	Time:
Expected length of visit	:
Purpose of visit:	
Telephone contact:	
Are you currently required to be in isolation because you have been diagnosed with coronavirus (COVID-19)? Yes or No	
	ed to a period of 14-day quarantine by the Department of Health and Human f being a close contact of someone with coronavirus (COVID-19)? Yes or No
	either of the above questions you should not attend work until advised by the Department dervices that you are released from isolation or until your 14-day quarantine period is
If you answered NO to	the above questions, proceed to the symptom checklist below.
Are you experiencing these symptoms? (check yes if applicable)	
Fever (If you have a the 37.5C)	ermometer, take your own temperature. You are considered to have a fever if above
Chills	
Cough	
Sore throat	
Shortness of breath	
Runny nose	
Loss of sense of smell	
If you answered YES to any of the above questions you should not enter your workplace (or should leave your workplace). Tell your employer, go home, and get tested for coronavirus (COVID-19). If you answered NO to all the above questions, you can enter your workplace.	

If you develop symptoms, stay at home and seek further advice from the 24-hour coronavirus hotline 1800 675 398 or your general practitioner.

Kerrie Poliness 0419154265 and Treasurer, Tim Wellington 0447878933