

*** REQUIRED FOR ALL VOLUNTEERS & VISITORS ***



Northern Illinois Food Bank
Volunteer & Visitor Health Statement

To help safeguard our volunteers, team members and visitors, the Food Bank has a number of safety-related steps in place to help prevent the spread of COVID-19. Volunteers and visitors are required to submit this prior to each shift. For those volunteering, this is in addition to the volunteer consent form.

Having been in one of the listed situations or failing to check all of the below may disqualify you from volunteering or visiting any of our locations for the time being. (PLEASE CHECK EACH STATEMENT)

- I have NOT traveled to one of the states experiencing COVID-19 hot spots in the last 14 days; neither has any member living in my household. (Given our proximity to Chicago, the Food Bank is following the same [Emergency Travel Order](#) as issued by the Chicago Dept. of Public Health).
- I have NOT had close contact with, cared for, or live in the same household as someone diagnosed with COVID-19 within the last 14 days.
- I do NOT have pending COVID-19 test results or are currently diagnosed as having COVID-19; nor have I been asked to self-quarantine for COVID-19.
- I have taken my temperature today and it is NOT 100.4 degrees or higher.
- I am NOT currently experiencing a fever with a cough and/or shortness of breath.
- I understand the precautions the Food Bank has in place and I am choosing to volunteer today.
- I understand that if I feel uncomfortable at any point during my shift, I am welcome to leave.
- I understand it is my responsibility to follow the Food Bank guidelines (based on CDC recommendations) to wash my hands before and after shifts, wear a mask and gloves, as well as practice appropriate social distancing at all times while volunteering.
- I understand that if at any time I do not follow the recommendations mentioned above, I may be asked to leave by Food Bank staff.

I certify all information checked above is true and correct to the best of my knowledge.

Volunteer First & Last Name (PLEASE PRINT)

Email Address

Volunteer Signature

Date

Phone #