

APPENDIX 3: Content of the “Acknowledgement Form”

This form will be available online. Details on how to access and use will follow.

COVID-19 RETURN TO WORK ON CAMPUS ACKNOWLEDGEMENT

The health and safety of the MIT community are our paramount concerns as MIT seeks to safely and equitably restore its educational, research, and administrative operations. The decision to return to campus at this time is voluntary and yours alone to make. However, if you decide to return, you are required to follow the conditions set forth below. The guidelines contained in the acknowledgement form below are intended to prevent the spread and reduce the potential risk of exposure to COVID-19 to our workforce and the surrounding community as employees gradually return to campus to carry on the important work of the Institute.

Please read and sign this form if you decide to return to campus at this time. As the global pandemic of COVID-19 continues to evolve, MIT remains committed to monitoring the situation closely and will update the conditions and this form as needed.

1. I, ___YOUR NAME_____, am deciding to return to work on MIT campus and agree to comply with the below terms and conditions of returning to campus during the COVID-19 crisis. I understand that my failure to do so may endanger others and may result in being barred from returning to campus and subject to other disciplinary measures.
2. I understand that I am not currently required to return to campus and that there are risks of returning to campus, including the risk of being exposed to the COVID-19 virus. I have not been pressured to return to work.
3. I understand that I will be asked to complete a health screening questionnaire each day to determine whether I have symptoms that may be associated with COVID-19 as established by the Center for Disease Control and Prevention (“CDC”).
4. Within the past fourteen (14) days, I have not tested positive for COVID-19, nor am I aware of coming into contact with anyone who I know has COVID-19 symptoms or has had a positive test for COVID-19.
5. I agree that if I exhibit symptoms of COVID-19, test positive for COVID-19, or come into close contact with someone who I know has symptoms of COVID-19 or who I know has tested positive for COVID-19, I will stay at home, self-isolate, notify Occupational Medicine/Student Health Department of MIT Medical and await further instructions. I further agree that I will cooperate with MIT Medical for all activities necessary to rapidly identify those with whom I may have had close contact, and follow any directions by MIT Medical or public health authorities to quarantine or remain in isolation.
6. I agree to follow the Commonwealth of Massachusetts COVID-19 workplace regulations, as well as the [CDC Guidance](#) and [MIT Guidance](#) for preventing the spread of COVID-19, including wearing a face mask or covering unless MIT Medical provides a medical exemption; exercising social distancing practices of at least six feet from others; washing hands often with soap and water for at least 20 seconds, or using an appropriate alcohol-based hand sanitizer (including that provided by MIT); properly covering my mouth and nose when sneezing or coughing; and regularly cleaning and disinfecting frequently touched surfaces in my workspace.

7. I understand that I must have a viral test prior to my return to campus and agree to any additional viral testing as directed by MIT. I further give permission to MIT to perform health monitoring of me, including, for example, taking my temperature or requiring a viral test, should MIT determine that such measures are prudent to maintain a safe campus environment.

8. I understand that MIT will take reasonable measures to ensure the confidential and private nature of the health monitoring information it may obtain from employees. However, I understand that MIT may share the testing results with certain MIT employees or city / state public-health officials with a legitimate need to know this information.

9. I agree to comply with instructions from certain MIT employees who may have been instructed to review access to campus and certain buildings. Instructions may include restricting access to campus and buildings via designated entrances and exits, scanning my MIT ID at designated access points, and signing in and out when reporting to or leaving campus.

10. I understand and agree MIT has the discretion to determine whether I am permitted to be on campus, or in a particular building, and at any time may require me to leave and not return to campus.

I HAVE READ THIS FORM BEFORE SIGNING IT AND VOLUNTARILY AGREE TO BE BOUND BY IT.