Acknowledgment

I've received and reviewed the COVID-19 General Safety Practices.

I understand the fundamentals of hygiene as well as the use and maintenance of PPE, and to this end, I have reviewed any information provided, including videos.

Nothing contained herein is intended to revoke or repeal any employee rights, either statutory, regulatory, or collectively bargained, and are not exhaustive. Nor are they a substitute for any existing safety and health-related regulatory requirements, such as those of Cal/OSHA.

This screening check list shall be treated as a confidential medical record in accordance with federal, state and local medical and data privacy laws. It shall be retained by the Company separately from any personnel or payroll records that the Company maintains for such period as permitted under applicable law.

By selecting 'Yes'	I acknowledge the above.
□ Yes	