Statement of Compliance – Covid-19 Training and Health Screening

I understand that my supervisor, Brad Bartelmay (known henceforth as "the supervisor") has deemed my work site, First United Methodist Church, 57 W. 10th Street, Holland, Michigan 49423 to be a MEDIUM RISK environment for the transmission of SARS-CoV-2. As such I have received the following training in preparation for working in this environment:

I have received, read and understood the document titled, "Preparedness and Response Plan for SARS-CoV-19: First United Methodist of Holland."

I have read, understood and agree to follow the practices outlined in the following documents:

- "How to Wash Cloth Face Coverings" from the Center for Disease Controls (CDC)
- "How to Safely Wear and Take Off a Cloth Face Covering" from the CDC

I have watched, understood and agree to follow the practices outlined in the following videos:

- "How to Wear a Cloth Mask Properly | Consumer Reports" https://www.youtube.com/watch?v=Yc_yKQryMIQ
- "Donning and Doffing Facial Protection Mask Alone" https://www.youtube.com/watch?v=OABvzu9e-hw
- "Donning and Doffing Exam Gloves" https://www.youtube.com/watch?v=xueBYfEIFEg

I agree to use the Sparrow "Occupational Health Employee Screening Tool" each day prior to arriving at work (https://www.sparrow.org/OccHealthScreening).

- If I pass the health screening, I will take a screenshot of the "green check" page. I will forward the screenshot as an email to the supervisor at his work email: brad@fumcholland.org.
- If I fail the health screening, I will NOT enter the church facility or participate in person in church ministries and I will contact the supervisor for instruction on working remotely or other agreed upon accommodations.

Furthermore, I understand I may not reenter the workplace or participate in person in church ministries until I have received written approval from the supervisor to do so. The supervisor will notify all employees of First United Methodist Church about the possibility of a case of COVID-19 and will continue to keep them updated about the risks associated with the possible case of COVID-19 as it evolves.

I understand that it is my responsibility to keep my workspace sanitized. Offices will be equipped with cleaning/sanitizing supplies and hand sanitizer.

| I understand that it is my responsibility to report unsafe work conditions pertaining to mitigating SARS-CoV-2 I to the supervisor. | | |
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| I have read and understand each of the items listed in this statement of compliance: | | |
| Signature | Printed Name | Date |