



At KV, people are always our priority. We want all our guests to have a great experience with us, and that starts by promoting and protecting the health of everyone visiting a KV/Workrite location around the world. To prevent the spread of Coronavirus, we're asking outside visitors to complete a health questionnaire prior to a planned visit to one of our facilities.

If you answer "yes" to any of the questions on the survey, we politely ask you to contact your KV host to reschedule your visit or make arrangements for a virtual meeting, If you answer "no" to these questions and plan to proceed with your visit, please bring this signed document with you to your meeting.

For our vendors, contractors and suppliers, we ask that you also sign this document for your initial visit following this notice so that we may keep it on file. We may periodically request that all vendors, contractors and suppliers provide us with new completed forms during this time. Please notify us immediately if any of your responses change.

We remain committed to doing what's best for our customers, employees and the communities where we live and work and thank you in advance for your partnership in this effort.

Sincerely,

Marla Morales

Vice President of Human Resources

Marla Morales

Knape & Vogt





## **KV VISITOR HEALTH SCREENING QUESTIONNAIRE**

The health and safety of our employees, customers, families and visitors remains the top priority of KV. As the Coronavirus situation continues to evolve globally, we're asking you to complete this screening to help prevent the spread of or exposure to COVID-19. If you answer "yes" to any of the following questions, we respectfully request you reschedule your visit or request a virtual meeting. If you answer "no" to these questions and plan to proceed with your visit, please print this document and bring it with you.

Visitor	Name:	Visitor Mobile/Home Phone Number:	
Visitor Company/Organization:		KV Host:	
Facility Name:			
Planned visit date of KV/Workrite visit:			
SELF DECLARATION BY VISITOR			
1.	1. Have you returned from, or connected through, any of the countries listed below within 14 days of your visit to KV? Iran, Japan, Mainland China, South Korea or Europe?		
2.	2. Have you 1) been diagnosed, 2) been in contact with someone who has been diagnosed or 3) been in contact with someone who may have been exposed (e.g. travelled to one of the countries listed above) with COVID-19 within 14 days of your visit to KV?		
3.	Have you experienced any cold or flu-like symptodifficulty breathing) within 14 days of your visit to	oms (including fever, cough, sore throat, respiratory illness, o KV?	

If you answered "yes," please defer your visit. If you answer "no," please proceed. Thank you.

Access to facility (circle: **APPROVED / DEFERRED**)

**Note**: If you plan to be onsite for consecutive days, please immediately advise your KV Host if any of your responses change.