



Inclusion Through
Diversity

Tompkins County Administration

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COUNTY ADMINISTRATOR

Jason Molino

DEPUTY COUNTY ADMINISTRATORS

Lisa Holmes and Amie Hendrix

"Promoting excellence in County operations while respecting the needs of the people we serve."

Tompkins County Employee Health Screening Attestation

I, _____, hereby agree that:

(Print Name)

- If I am sick or showing symptoms of illness, I will stay home or return home if I become ill at work.
- I have been provided a copy of my department's Health Screening Plan.
- I will answer the questions to be the best of my knowledge at the time that I am asked the questions.

I have been provided, reviewed, and understand COVID-19 Directive #3.1 – Employee Screening.

Employee Signature

Date

Supervisor Signature

Date