Before entering please read and answer the questions below:

- Have you had ANY of the following symptoms of COVID-19 infection in the last 7 days?
  - Cough (either new or different than your usual cough)
  - Fever or chills (either believed or measured)
  - Sore throat
  - Headache or unusual muscle pain
  - Diarrhea

- Have you had a positive test for COVID-19 infection within the past 10 days?

- In the past 10 days, have you been within 6 feet for longer than 15 minutes with someone who has suspected or confirmed COVID-19 infection?

Learn more: www.salisbury.edu/coronavirus
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