University of Illinois at Urbana Champaign
COVID-19 Return to Campus Information

This COVID-19 information summary is being provided as another means of communicating the following basic COVID-19 information for employees who are returning to campus. We want every employee to be aware of this information to help us maintain a safe work environment.

Dear <Name>,

As you return to campus, I want to remind you of critical information.

Two critical requirements for faculty, staff (and students) who participate in any on-campus activities:

1. Participate in our mandatory, twice-weekly on-campus saliva based COVID-19 testing. Robust testing is one of the key ways to keep our community safe. Employees will test twice weekly.
2. Notify the University if you test positive for COVID-19 or are placed in quarantine by a public health district due to exposure or in accordance with Centers for Disease Control post-travel quarantine standards.

Two important resources:

1. The Return to Campus: What you Need to Know guide contains helpful information, including FAQs about what to expect as you return. This comprehensive guide is updated frequently.
2. Employees and students who return to campus are required to take the Division of Research Safety’s COVID-19 online training, which should take about 15 minutes to complete.

Key Things to Remember!

When you return to campus you must:

- maintain six-foot distance from other people whenever possible
- wear face coverings in university facilities unless you are alone in a private space. Face coverings are also required for outside campus spaces where sufficient social distancing is not possible.
- wash your hands frequently and avoid touching your face
- wipe down surfaces other people have touched before you touch them

Thank you for your cooperation and diligence in taking these actions. Together, we can support the safety and wellness of ourselves, our campus and greater community.

Optional Information

As we discussed, your Return to Campus Date is <insert date>
Your Return to Campus Work Schedule: <insert schedule, note changes, etc.>

If you have any questions, please contact me as soon as possible.

Signature of Supervisor (Could also be from Dean/Dept. Head if you do not want to include the specific return details)

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Acknowledgement of Receipt

I received this information on ____________________

<Employee Name>

NOTE: Signing this form only acknowledges receipt of the information.