**Sample Survey about Employee Testing

Purpose:** The following survey questions can be used to measure employee interest in BinaxNOW COVID-19 testing, as well as to collect information about concerns and questions related to the testing program. The questions can be transferred to an online survey form, using programs such as Google, Microsoft 365 or Survey Monkey.
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**[District] Employee Testing Survey**

**Name:
Building:
Position:**

**Are you interested in participating in the testing program? (This is not a written commitment to participate. We are simply gauging interest.)**

🗌 Yes
🗌 No
🗌 Maybe

**Which of the following describes your testing interest? (Please check all that apply.)**
🗌 I would like to be tested if I am exposed.
🗌 I would like to be tested if I exhibit symptoms.
🗌 I would like to be tested whenever I request it.
🗌 I would like to be part of a program that tests employees on a regular basis.

**What additional information do you need about the testing program to make a firm decision about participation?**

**What concerns, if any, do you have about the testing program?**