**Employee Survey: COVID-19 Vaccine Status**

[Company name] is requesting input from employees regarding their COVID-19 vaccination status and how [Company name] may help to facilitate vaccinations for employees. This anonymous and voluntary survey will help senior management make decisions regarding reopening the office; however, the results of this survey will not be the only information used in the decision-making process. At this time, [Company name] has no intention of mandating the COVID-19 vaccine.

Have you received a COVID-19 vaccine?

* Yes
* No

(If yes, this survey is complete, and you may submit it now.)

If not, do you plan to receive the COVID-19 vaccine?

* Yes
* No

If you are planning on receiving the vaccine, in what time frame do you plan to do so?

* Within the next month
* Within the next three months
* Within the next six months

Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you are planning on receiving the vaccine, where would you prefer to receive it if given the choice:

* My health care provider
* Local health department
* Vaccination clinic at [Company name] worksite
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(If you are planning on receiving the vaccine, this survey is complete, and you may submit it now.)

If you do not plan on receiving the vaccine, please answer the following:

Would a monetary incentive offered by [Company name] change your mind?

* Yes
* No

Would another type of incentive offered by [Company name], such as paid time off, change your mind?

* Yes If so, what type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* No

Do you have a medical reason for not receiving the COVID-19 vaccine?

* Yes
* No

Do you have a religious objection to receiving the COVID-19 vaccine?

* Yes
* No

Would you find it helpful if [Company name] provided employees with resources on the COVID-19 vaccine, such as educational information, state/county vaccination schedules and estimated time frames for eligibility?

* Yes
* No

Thank you for your input. Please return this survey to human resources no later than [date].