**Employee Survey: COVID-19 Vaccine**

CHELCO is requesting input from employees regarding their intentions to receive the COVID-19 vaccine and how CHELCO may help to facilitate vaccinations for employees. This anonymous and voluntary survey will help senior management make decisions; however, the results of this survey will not be the only information used in the decision-making process. CHELCO has no intention of mandating the COVID-19 vaccine.

Do you plan to receive the COVID-19 vaccine once it becomes available to you?

* Yes
* No

If yes, where would you prefer to receive the vaccine if given the choice:

* My health care provider
* Local health department
* Vaccination clinic at CHELCO worksite
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If no, please answer the following:

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

Did you know that CHELCO employees who get the vaccine during normal working hours will be paid their regular pay rate and reimbursed for travel to the vaccination site from home/work (whichever is shorter)?

* Yes
* No

Would you find it helpful if CHELCO 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

Please select the division to which you are assigned:

* Administrative
* Engineering
* Finance
* Member Services & External Affairs
* Operations

Thank you for your input.