****

**UNO Compact**

As a commitment to community health and behavioral standards, I pledge to:

1. Protect Myself

* Monitor for symptoms of COVID-19, including fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, or diarrhea. I will contact a medical professional if I experience these symptoms.
* Wash my hands with soap and water or use hand sanitizer frequently.
* Adhere to capacity limits on campus and avoid gatherings where social distancing is not possible.

2. Protect Others

* Wear a mask or face covering in shared common spaces on campus.
* Maintain appropriate social distance from others.
* Stay home if I feel ill or after exposure to someone who is ill or has tested positive for COVID-19.
* Modify my actions and encourage others to do the same as safety guidelines and recommendations evolve over time.

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_