## Background pattern Description automatically generatedEMPLOYEE RETURN-TO-OFFICE SURVEY

**[Note: This survey is intended to be edited and customized by employers to suit their unique needs]**

[Company name] is preparing to reopen its workplace now that the COVID-19 pandemic is easing. Most importantly, we want to ensure employees feel safe returning to in-person work. To that end, we’ve developed this survey to help get your feedback on how we may improve our process, consider employee needs and take steps to address concerns.

Please take a few moments to complete this survey and help us with our return-to-work efforts. Our goal is to welcome everyone back to the workplace in a safe, efficient manner.

Please return the completed survey to [insert contact name].

**Thank you!**

1. How would you categorize your feelings about returning to in-person work? Select all that apply.

Eager

Prepared

Nervous

Concerned

1. Please explain your answer(s) to the above question. Please be as specific as possible.
2. What are your concerns, if any, about returning to in-person work? Select all that apply.

Becoming sick myself

Spreading illness to my co-workers

Losing the flexibility of remote working

Decreasing my productivity

Finding someone to help with my caregiving responsibilities

Other—please explain

1. Which of the following measures would you like to see implemented in the workplace? Select all that apply.

Having workspaces cleaned more frequently

Allowing for some remote work or flex scheduling

Limiting the workplace’s capacity and distancing workers

Requiring everyone to wear masks, even if vaccinated

Encouraging all employees to get vaccinated

Restricting the number of workers allowed in communal spaces at one time

Limiting the number of outside vendors or guests allowed into the building

Implementing temperature checks before anyone is allowed inside the workplace

Installing partitions between desks

Providing hand sanitizer and other cleaning products for employees to use at will

Expanding sick leave policies

Other—please explain

1. If you had the option, what style of work would you prefer? Select one.

In-person work

Fully remote work

A mix of in-person and remote work (hybrid schedule)

1. Please explain your answer to the previous question.
2. Please provide any additional comments about your feelings toward returning to in-person work.