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| Employer notification form – confirmed COVID-19 case |
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This form is used to notify the Department of Health when there has been a confirmed case of COVID-19 in your workplace. When completed, please return immediately to the department [via email to covidemployernotifications@dhhs.vic.gov.au](mailto:covidemployernotifications@dhhs.vic.gov.au) and proceed to the next step of the[**Confirmed case in the workplace checklist (Word)**](https://www.dhhs.vic.gov.au/confirmed-case-of-coronavirus-covid-19-in-workplace-doc)**.**

For guidance, please see [**Workplace guidance for managing suspected and confirmed cases (Word)**](https://www.dhhs.vic.gov.au/workplace-guidance-for-managing-suspected-confirmed-cases-covid-19-doc)**.**

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| Workplace details | |
| **Full name** |  |
| **Address** |  |
| **Type of workplace and industry** |  |
| **Phone number** |  |
| Key workplace contact | |
| **Full name** |  |
| **Job title** |  |
| **Phone number** |  |
| **Email** |  |
| Confirmed case details | |
| **Full name** |  |
| **Date of birth** |  |
| **Address** |  |
| **Phone number** |  |
| **Employee role** |  |
| **Date of test/swab** |  |
| **Date symptoms started** |  |
| **Did the confirmed case attend work during their infectious period? (Yes/No)***The infectious period = 48 hours or 2 calendar days before symptoms started.*  *For cases with no symptoms, the infectious period is taken as 48 hours or 2 calendar days before test date.* |  |

To receive this document in another format phone 1300 651 160 using the National Relay Service 13 36 77 if required, or [email](mailto:%3ccovidemployernotifications@dhhs.vic.gov.au%3e.) covidemployernotifications@dhhs.vic.gov.au.

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Available at: [DHHS.vic – coronavirus (COVID-19)](https://dhhsvicgovau.sharepoint.com/sites/COVID-19Operations-DHHS-GRP/Shared%20Documents/Strategy,%20Planning%20and%20Policy/Guidelines%20being%20updated/Workplace%20guidance/Workplace%20pack%2015%20Sept%202020/DHHS.vic%20–%20coronavirus%20(COVID-19)) <https://www.dhhs.vic.gov.au/coronavirus>