



CARING FOR THE HERD

BUFFALO PLEDGE

Being a part of the Milligan community means that each of us must take extraordinary steps to stay well and persistently protect each other on campus and in the community. Demonstrate your commitment to keep Buff Nation in good health by taking the pledge below and honoring it during the upcoming semester. **I PLEDGE TO:**

PROTECT MYSELF

- Monitor for the symptoms of COVID-19 and report to a medical professional if I experience fever of 100.4 F (38 C) or higher, dry cough, difficulty breathing, chills, repeated shaking with chills, muscle pain, headache, sore throat or loss of taste or smell
- Wash my hands often with soap and water or use hand sanitizer
- Get vaccinated for the flu in the fall (or sign a [declination form](#))

PROTECT OTHERS

- Maintain appropriate social distancing
- Stay home if I feel ill or after exposure to someone who is ill or has tested positive for COVID-19
- Wear an appropriate face mask and other protective gear as directed by the University
- Be positive, attentive, and helpful to anyone around who needs support

PROTECT BUFF NATION

- Keep my clothing, belongings, personal spaces, and shared common spaces clean
- Monitor for and report all symptoms of COVID-19 to Milligan Health Services
- Cooperate with testing and contact tracing
- Carefully follow University requirements to self-isolate or quarantine

Milligan's highest priority is the safety of its students, faculty, staff, and visitors. I know that by engaging in campus activities, including attending classes, pursuing my education, living on campus, eating in the dining halls, attending activities, participating in sports and recreation, I may be exposed to COVID-19 and other infections. I also understand that despite all reasonable efforts by the university, I can still contract COVID-19 and other infections. In order to reduce my risk, I agree to be an active participant in maintaining my own health, wellbeing and safety, as well as the safety of others, by following all the guidelines and expectations outlined by the university.



Name of Student or Employee

Signature

Date