Employee Survey

**Survey Questions**

1. **How would you rate your overall well-being while you are working from home?**

Very positive

Somewhat positive

Neither positive nor negative

Somewhat negative

Very negative

1. **How would you describe your work-life balance while working from home?**

Balanced

Mostly balanced

Neutral

Mostly unbalanced

Unbalanced

1. **Overall, how comfortable would you feel returning to work in the office sometime in the first quarter of 2021?**

Very uncomfortable

Somewhat uncomfortable

Neither comfortable nor uncomfortable

Somewhat comfortable

Very comfortable

1. **Which, if any, of the following concerns do you have about returning to the office?  Please select all that apply.**

Getting exposed to COVID at the office

Leaving family members at home who need assistance

Getting exposed to COVID while commuting to work

Decreased flexibility to work from home

Organizing childcare

Not being able to return to the office due to other (non-COVID) health reasons

Decreased productivity

Potentially spreading COVID to my coworkers

Reintroduction of commuting expenses currently alleviated by remote work

Other (please specify)

I do not have any concerns about returning to the office

1. **Would regular Rapid Antigen Testing make you feel more comfortable returning to work at the office?**

Yes

No

I’m not sure

1. **What would be your ideal future working arrangement?**

Working from home full-time

Working from home 1-2 days per week

Working from home 3-4 days per week

Working from home partial days (e.g., mornings at home and afternoons in the office)

Primarily working from home and coming into the office only as necessary

Working in the office full-time

1. **How do you primarily commute to the office?**

I drive myself to work

Carpool/someone drops me off

Transit -

Walk

Cycle

1. **Is there anything else you would like to add at this time?**