**[DISCLAIMER: This letter may be useful if your business is a critical service, as per the assessment** **here****. Once registered, it can be used by your workers as part of the evidence required in order to obtain rapid antigen tests. This letter is a starting point only – while there are yellow boxes you will need to complete, you should check that the rest of the text is accurate to your situation.]**

**DAY MONTH 2022**

**TO WHOM IT MAY CONCERN**

[**Name of Worker**] is a worker for [**Business Name**], which is a Critical Service. Our application number for the Critical Services Register is **[Number – this is from your confirmation email when you registered]**. **[If applicable]** Their worker identification number is **[Number]**.

Our business is a Critical Service because it is in the food production and manufacturing sector. If the business was required to temporarily close it would cause significant animal welfare compromise and economic harm to our business and to the community.

The worker named above is critical to our business operations because **[Explain how this person is critical to your critical service]**

To minimise transmission risks, the work named above will: **[this list is based on the Ministry of Health requirements]**

* Conduct a daily symptom check and rapid antigen test before entering the workplace.
* Wear a medical mask, put on before entry to the workplace, changed as needed during the day and strictly complying with any infection prevention and control protocols at work.
* Maintain physical distancing whenever their mask is removed (e.g., for meal breaks).
* Eat alone in a well-ventilated space, outdoors where possible.
* Travel solo, to, from and around work or between jobs where possible.
* Ensure good ventilation when in small spaces and masks must be worn by everyone present.
* [If this is already in place] Continue regular workplace surveillance testing.
* If symptoms develop at any stage, follow the public health advice for close contacts with symptoms.
* Self-isolate at home, away from other household members, as per standard close contact advice, including testing if applicable.

If you have any questions about this worker please contact: [**name, phone number**]

Signed:

**[Name of appropriate senior person]
[Name of your Critical Business]**