



GARFIELD PUBLIC SCHOOLS

HEALTH SCREENING QUESTIONNAIRE 2021-2022

Covid-19 Daily Screening Questions

PARENTS MUST MONITOR THE CHILD'S HEALTH DAILY USING THE CHECKLIST BELOW PRIOR TO SENDING THE CHILD TO SCHOOL. IF A CHILD HAS ANY OF THE SYMPTOMS IN THE GRID, IT IS EXTREMELY IMPORTANT THAT YOU KEEP THE CHILD HOME AND CONTACT YOUR MEDICAL PROVIDER.

IF YOUR CHILD IS A CLOSE CONTACT TO SOMEONE WHO HAS COVID-19, THE CHILD SHOULD REMAIN HOME IN QUARANTINE.

IF YOUR CHILD HAS TAKEN A COVID-19 TEST, THE CHILD MUST REMAIN HOME WHILE WAITING FOR RESULTS.

REMEMBER TO REPORT ALL TRAVEL TO THE BUILDING PRINCIPAL SINCE QUARNATINE MAY BE NECESSARY.

CONTACT THE SCHOOL NURSE TO INFORM THE SCHOOL OF ANY ISSUES AND REASON FOR ABSENCE.

THANK YOU FOR WORKING TOGETHER WITH US TO KEEP OUR STUDENTS AND STAFF SAFE FOR IN PERSON INSTRUCTION.

SYMPTOMS OF COVID-19	YES	NO
Fever over 100.4* F or greater		
Cough or shortness of breath		
Sore throat		
Chills		
Muscle aches, shivering, or fatigue		
Headache		
Recent loss of taste or smell		
Abdominal pain, nausea, vomiting, or diarrhea		
Congestion or runny nose		
Difficulty breathing		

- Does the student have any of the symptoms listed above? If so, do not send to school and contact your medical provider.
- Did the student have close contact for at least 15 minutes (not necessarily at one time) within 6 ft of anyone who has been confirmed to be Covid-19 positive or someone who is currently sick? YES NO
- Has the student been tested for Covid-19 in the last 3 days? YES NO
- If so, what was the result of the COVID-19 test? Awaiting results Positive Negative
- Has the student traveled to another country or another state within last 14 days? If yes, where? _____ YES NO

IS THE STUDENT FULLY VACCINATED? YES NO
