



DAILY SYMPTOMS CHECKLIST

Before the start of each day, it is recommended that students and staff complete a self-screening:

- Have you been diagnosed with COVID-19 since you were last at school?**
- Have you had any of the following symptoms since you were last at school?**

- **Fever**
- **Chills**
- **Shortness of breath or difficulty breathing**
- **New cough**
- **New loss of taste or smell**
- **Congestion/runny nose**
- **Nausea/vomiting/diarrhea**
- **Sore throat**
- **Headache**
- **Muscle or body aches**
- **Fatigue**

- Have you had close contact (been within 6 feet of someone diagnosed with COVID-19 for a cumulative total of 15 minutes over a 24-hour period) in the last 14 days?**

- Has any health department staff or a health care provider been in contact with you and advised you to quarantine?**

→ If NO to ALL questions, you may report to school.

→ If YES to ANY of the questions, please contact the school nurse or the designated point person for additional follow-up and do not report to school.

www.ksdr1.net/covid-19-updates