



## VISITOR SCREENER FOR COVID-19

The district is required to screen all visitors to determine if they have COVID-19 symptoms, are lab-confirmed with COVID-19, or have had close contact with an individual who is lab-confirmed with COVID-19. In addition, the visitor's temperature will be taken by a staff member.

Name: \_\_\_\_\_

Campus: \_\_\_\_\_

Date: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Yes	No	
		Are you lab-confirmed with COVID-19?
		In the past 14 days, have you had close contact with an individual who is lab-confirmed with COVID-19?
		Have you recently begun experiencing <b>any</b> of the following in a way that is <b>not normal for you</b> ? <ul style="list-style-type: none"><li><input type="radio"/> Fever (<math>\geq 100.0</math> °) or chills</li><li><input type="radio"/> Loss of taste or smell</li><li><input type="radio"/> Cough</li><li><input type="radio"/> Difficulty breathing</li><li><input type="radio"/> Shortness of breath</li><li><input type="radio"/> Headache</li><li><input type="radio"/> Fatigue</li><li><input type="radio"/> Significant muscle or body aches</li><li><input type="radio"/> Sore throat</li><li><input type="radio"/> Congestion or runny nose</li><li><input type="radio"/> Nausea, vomiting, diarrhea</li></ul>

If you answered yes to any of the above:

- You must remain off campus until cleared to return

Reminders to follow if you are cleared to enter:

- Wear a mask or face covering
- Wash your hands or use hand sanitizer regularly
- Practice social distancing of at least 6 feet

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Staff Initial \_\_\_\_\_ Recorded Temperature \_\_\_\_\_