

COVID-19 Screening Questionnaire

Before you allow your child to go to school, please ask them these questions:

- Do you have a fever (temperature over 100.4°F) without having taken any fever-reducing medications?
- Do you have a loss of smell or taste?
- Do you have a cough?
- Do you have muscle aches?
- Do you have a sore throat?
- Do you have congestion or a runny nose?
- Do you have shortness of breath?
- Do you have chills?
- Do you have a headache?

If your child answers yes to any question, please do not send them to school.