



# COVID-19 Daily Symptom Checker for Students: Assessments & Cohorts

Dear Parent/Guardian,

The Los Angeles County Public Health Officer and the California Department of Public Health (CDPH) require that a daily Covid-19 symptoms check be conducted for each student every morning before coming to school and entering campus. *The COVID-19 Daily Symptom Checker for Students* must be completed whether your child has symptoms or not.

Your child should not come to school if there are any **YES** answers to the questions below or if he/she is experiencing any of the symptoms listed.

Students First and Last Name \_\_\_\_\_ School \_\_\_\_\_

Parent/guardian name \_\_\_\_\_

Parent/guardian phone (\_\_\_\_) \_\_\_\_\_ Email address \_\_\_\_\_

## Is your child feeling ill?

Yes  No

## Does your child have any of the following symptoms?

- Temperature of 100.4 degrees or higher
- Cough (especially a new uncontrolled cough causing difficulty breathing; for children with chronic allergic asthmatic cough, a change in baseline cough)
- Shortness of breath or difficulty breathing (unexplained)
- Headache (unexplained)
- Sore Throat
- Chills or uncontrollable body shaking with chills
- Nausea or vomiting (unexplained)
- Diarrhea (unexplained)
- Fatigue (unexplained)
- Congestion or runny nose (unexplained and unrelated to existing seasonal allergies underlying chronic condition)
- Muscle aches or body aches
- New loss of taste or smell
- Student has no COVID-19 symptoms**

## Has your child been diagnosed with COVID-19 or asked by a health care provider to be tested for COVID-19 in the past 14 days?

Yes  No

## Has your child been in close contact (less than 6 feet for 15 minutes or more) with someone who has been diagnosed with COVID-19 or someone who has been told by a health care provider to be tested for COVID-19 in the past 14 days?

Yes  No

If you answered **YES** to any of the above questions, your child will not be able to enter campus. You will be provided with further information and instructions.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Temperature: \_\_\_\_\_

Staff Signature: \_\_\_\_\_