

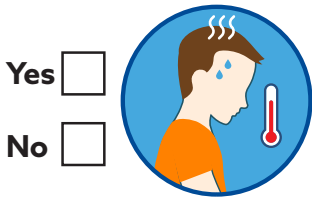


COVID-19

Please use this form to screen your child every day before sending your child to school, and initial the accompanying attestation form to confirm the screening has been completed.

Name: _____

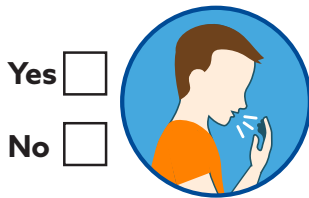
Do you or your child have any of the following without underlying cause:



Yes

No

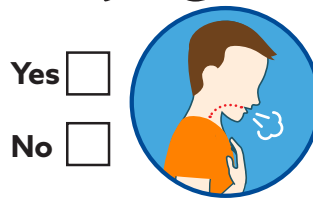
Fever



Yes

No

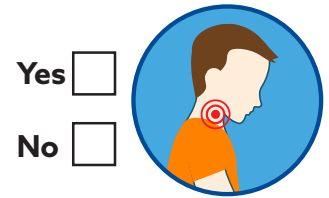
Cough



Yes

No

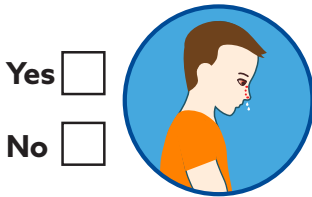
Difficulty breathing



Yes

No

Sore throat, trouble swallowing



Yes

No

Runny nose or red eyes



Yes

No

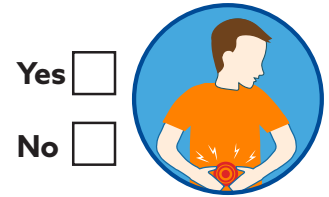
Loss of taste or smell



Yes

No

Not feeling well, tired or sore muscles



Yes

No

Nausea, vomiting, diarrhea

Yes

No

Have you been in close contact with someone who is sick or has confirmed COVID-19 in the past 14 days?

Yes

No

Have you returned from travel outside Canada in the past 14 days?

If you answered YES to any of these questions, please keep your child at home and call Bloorview School Authority Safe Arrival Line at (416) 424-3831 to report the absence. Stay home, self-isolate right away. Call Telehealth or your health care provider, to find out if you need a test.