

COVID19 PARENT AGREEMENT

I, _____, parent/guardian of:
Print Name

_____, agree to screen my child every
Student Name & Grade

morning, taking their temperature, and if they have any of the symptoms listed below, will keep my child at home.

A temperature of 100.4 F is considered a fever by the Centers for Disease Control and Prevention.

Public health officials have learned that the infection can cause a wide range of symptoms, from barely noticeable sniffles and headaches to difficulty breathing and chest pain. The CDC currently lists the following possible symptoms, but says there may be others:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

Parent/Guardian Signature

Date