



Kutztown Area School District

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- Maximize potential, embrace change, create the future-

KASD Guidance for Return to School After Travel

On March 1, 2021, the Governor of Pennsylvania and the Department of Health have terminated the travel restrictions put in place on November 9, 2020 and updated on December 9, 2021. Please complete this form for each student/staff member who is returning to KASD after traveling outside of Pennsylvania.

PART 1

While you were Traveling, during your trip, did you take steps to protect yourself and others from COVID-19:

- Did you wear a mask to keep your nose and mouth covered when in public settings?
- Did you avoid close contact by staying at least 6 feet (about 2 arms' length) from anyone who is not from your household?
- Did you wash your hands often or use hand sanitizer (with at least 60% alcohol)?
- Did you avoid contact with anyone who is sick?
- **Have you completed all requirements stated above regarding travel and testing requirements after travel outside of PA**

Circle One: **YES** **NO** **If NO, you should not report to school and quarantine for 10 days.**

PART 2

In addition, please answer the following screening questions:

Please Circle One:

- | | | |
|------------|-----------|--|
| Yes | No | 1. Do you presently have any signs or symptoms of COVID-19 (fever-100.4 or higher, cough, shortness of breath, chills, loss of taste or smell)? |
| Yes | No | 2. Have you had any of the above signs or symptoms in the past two weeks? |
| Yes | No | 3. Have you or someone you live with tested positive for COVID-19 within the past two weeks or are you waiting for test results for yourself or anyone who lives with you? |
| Yes | No | 4. Are you presently caring for or living with someone who has experienced the signs or symptoms of COVID-19 within the past two weeks? |
| Yes | No | 5. In the last two weeks, have you or someone you live with been under quarantine for COVID-19? |
| Yes | No | 6. In the last 24 hours have you taken any fever-reducing medication? |

If you answer "YES" to ANY of the Health Screening questions above, please DO NOT report to school.

Name of Student/Staff Member

KASD Building they attend or work in

Signature (parent or staff member)

Date:

<https://www.health.pa.gov/topics/disease/coronavirus/Pages/Travelers.aspx>

You can read the full and updated [Travel Recommendations](#) here.