



Student-Athlete Screening Information

All students participating in athletics, in-season and off-season, will be required to go through a brief health screening to include temperature check.

If a student-athlete affirms to the following symptoms, they will be sent home and the building level athletic director must be notified IMMEDIATELY. Any person with positive symptoms reported will not be allowed to take part in workouts. Students will not be allowed to return to participate until they are symptom free for seventy-two hours and ten days have passed since their first symptom unless they have a clear diagnosis from a medical provider in writing.

- **At least one (1) of the following:**

- Dry Cough
- Shortness of Breath
- Loss of Sense of Taste or Smell

*** OR ***

- **At least two (2) of the following:**

- Fever (100.3 Fahrenheit or higher)
- Chills
- Muscle Pain
- Sore Throat
- Gastrointestinal symptoms of diarrhea, vomiting, or nausea.

Student Athlete Name: _____ Sport: _____

Student/Coach Name (Print): _____

	Date	Dry Cough	Shortness of Breath	Loss of Taste Or Smell	Temperature (100.3 or higher)	Head/Body Aches/Chills	Muscle Pain	Sore Throat	Diarrhea, vomiting, or nausea
Monday		Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No
Tuesday		Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No
Wednesday		Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No
Thursday		Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No
Friday		Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No
Saturday		Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Have you or anyone in your house tested positive for COVID-19?	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No
Yes? What date?						
Are you or anyone in your house waiting for COVID-19 results?	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No
Yes? Test date?						
Have you been exposed to anyone that has tested positive for COVID-19?	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No
Yes? Date exposed?						