## Daily Home Screening

By entering Ryan Academy/Building Blocks Preschool, all employees, students, parents, and all authorized visitors, acknowledge the following:

- Your temperature is under 100.4 degrees and has been without any fever reducing medicines for the last 24 hours; and
- You or anyone in your household does not have a new cough or new shortness of breath; and
- You or anyone in your household who has exhibited any COVID-19 symptoms has either been symptom-free for 14 days or has since tested negative for COVID-19; and
- In the past two (2) weeks, you have not been exposed less than six (6) feet for greater than 15 minutes to anyone who has tested positive for COVID-19 without wearing the appropriate Personal Protective Equipment (PPE) as defined by the Centers for Disease Control and Prevention.

Parents: Please complete this short check each morning before your child leaves for school.

## **SECTION 1: Symptoms**

If your child has any of the following symptoms, that indicates a possible illness that may decrease the student's ability to learn and also put them at risk for spreading illness to others. Please check your child for these symptoms:

- □ Temperature 100.4 degrees Fahrenheit or higher when taken by mouth
- $\Box$  Sore throat
- □ **New** uncontrolled cough that causes difficulty breathing (for students with chronic allergic/asthmatic cough, a change in their cough from baseline)
- Diarrhea, vomiting, or abdominal pain
- □ New onset of severe headache, especially with a fever

If your child has any of these symptoms, please keep them home.

## ACKNOWLEDGMENT OF SYMPTOMS AND RISK

The following are the symptoms of COVID-19 currently known to the World Health Organization. You understand that for the safety and well-being of all who enter our schools, you will not enter, or send children to school, if you/they have any of the following.

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

Ryan Academy/ Building Blocks Preschool has taken protective measures to reduce the risk of exposure to COVID-19 on school premises, but they cannot possibly guarantee that no one will be exposed to COVID-19. COVID-19 is highly contagious and can spread from person to person through small droplets from the nose or mouth, which are expelled when a person with COVID-19 coughs, sneezes, or speaks. People can contract COVID-19 if they breathe in these droplets or touch them after they have landed on objects and surfaces, such as tables, doorknobs, and handrails.

By signing this document, you acknowledge and voluntarily assume the aforementioned risk and agree that you and everyone in your household will comply with the COVID-19- related precautionary measures set in place at Ryan Academy/Building Blocks Preschool.

By entering Ryan Academy/Building Blocks Preschool, all employees, students, parents, and all authorized visitors, acknowledge the following:

 $\checkmark$  Your temperature is under 100.4 degrees and has been without any fever reducing medicines for the last 72 hours; and

 $\checkmark$  You or anyone in your household does not have a new cough or new shortness of breath; and

 $\checkmark$  You or anyone in your household who has exhibited any COVID-19 symptoms has either been symptom-free for 14 days or has since tested negative for COVID-19; and

 $\checkmark$  In the past two (2) weeks, you have not been exposed - less than six (6) feet for greater than 15 minutes - to anyone who has tested positive for COVID-19 without wearing the appropriate Personal Protective Equipment (PPE) as defined by the Centers for Disease Control and Prevention.

If anyone is exhibiting COVID-19 symptoms on school property, he or she will be required to leave.

The above policies help us maintain a safe environment in our school buildings and minimize the risk of spreading COVID-19 (or any viruses) within our school. By signing below, you acknowledge the risks and agree to the entirety of this document.

Parent Signature

Printed Family Name

Date