

K-12 SCHOOLS SYMPTOM SCREENING: Parent/Guardian Attestation

Child's First		Child's Last Name:			
Parent/Guardian First Name:			Pare	nt/Guardian Last Name:	
the last 14 health car o Yes requilling	days with e provider b > The chi uirements in ess or Expos	someone diagnobeen in contact ld should not be an the DPH's "Retusure"	osed with Co with you and at school. The rn to School	or a cumulative total of 15 DVID-19, or has any healt d advised quarantine for e child can return after com and Child Care Guidance of is not experiencing sympto	th department or your child? opleting ALL After COVID-19
	r child have (≥100.4°F) or	e any ONE of the	below sym	otoms? New cough	
☐ Shortn	r child have	or difficulty breath any TWO of the Nausea Muscle or body a	below sym	New loss of taste or smell ptoms? Vomiting Chills	If a child has any of thes symptoms, they should stay home, stay away from other people, and you should call the child health care provider.
☐ New nas	al congestion	n/stuffy or runny no	se		
4. Since they	If a child is o	diagnosed with CO	VID-19 based ad symptoms,	en diagnosed with COVIE on a test, their symptoms, or they should not be at school a ia below.	does not
A child can requestions:	turn to scho	ool when a family	member can	ensure that they can answ	ver YES to ALL three
o Has	it been at le dicine)?	east 24 hours sin	ce the child h	st had symptoms? and a fever (without using f	
	rtness of bre		oc me omia s	Symptoms have improved	, moldaring cought and

If a child has had a negative COVID-19 test, they can return to school once there is no fever without the use of fever-reducing medicines and they have felt well for 24 hours.

If a child has been diagnosed with COVID-19 but does not have symptoms, they should remain out of school until 10 days have passed since the date of their first positive COVID-19 diagnostic test, assuming they have not subsequently developed symptoms since their positive test.

If a child has been determined to have been in close contact with someone diagnosed with COVID-19, they should remain out of school and extracurricular activities until they have completed all requirements in the DPH guidance for persons exposed to COVID-19 found at https://dph.georgia.gov/contact.

I attest that the fo	llowing info	rmation is true to the best of my knowledge a	s of:
	ryker i s	AM PM Signature:	
MONTH DAY YEA	R TIME	CIRCLE ONE	