



Eureka City Schools

Inspiring academic **E**xcellence, **C**reativity, and the confidence to **S**ucceed

2100 J Street, Eureka, CA 95501 (707) 441-2400

COVID-19 Self Screening Form

Please complete this self-screening and take your temperature at the beginning of each day before arriving on campus. Only enter the building if you answered ‘No’ to all the questions and your temperature is less than 100.4°. If you answered “Yes” to any question please notify the school site secretary. This form does not need to be turned in each day.

- 1. Are you experiencing any symptoms such as fever, cough, or shortness of breath?**

Yes

No

- 2. Have you been in close contact* with anyone who has been diagnosed with COVID-19?**

**Has anyone in your household had a fever, cough, difficulty breathing, or other signs of illness in the last 24 hours? Have you been exposed to another individual with suspected or confirmed Covid-19. The CDC is required to document and track all known incidents of possible exposure.*

Yes

No

- 3. Are you currently in close contact with anyone, such as a family member, who is experiencing symptoms or has been confirmed as positive for COVID-19?**

Yes

No

- 4. Is your temperature less than 100.4° F?**

Yes

No