

COVID-19 SCREENING PASSPORT Parent to complete each day and send along with child to school

STUDENT NAME: _____ DATE: ____

1. Does your child have any of the following new or worsening symptoms?*



Stay home, self-isolate + Get tested OR contact a health care provider. any symptom:

2. Does anyone in your household have one or more of the above symptoms?

3. Has anyone in your household travelled outside of Canada in the past 14 days?

4. Has anyone in your household been notified as a close contact of someone with COVID-19 or been told to stay home and self-isolate?

> If you answered "YES" to questions 2, 3 or 4: Stay home + follow Toronto Public Health advice

*Children who have an existing health condition identified by a health care provider that gives them the symptoms should not answer YES, unless the symptom is new, different or getting worse. Look for changes from your child's normal symptoms.

This Screening Passport was revised 08 FEB 2021

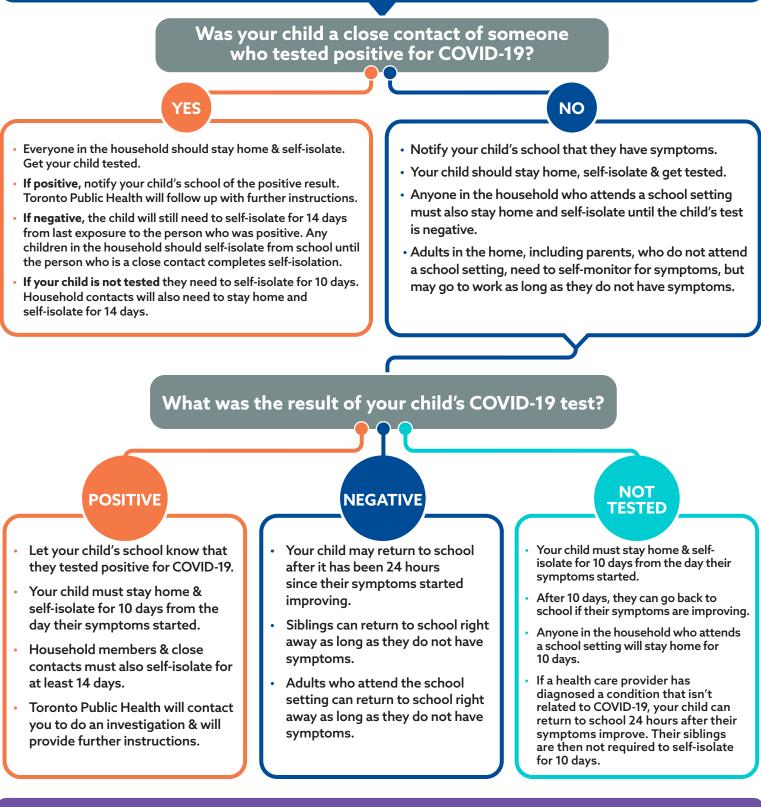


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"My child does not have any of the symptoms/risk factors from the previous page."

DATE:	PAPENT SIGNATURE
DATE:	PARENT SIGNATURE:

MY CHILD HAS 1 OR MORE SYMPTOMS OF COVID-19. WHAT SHOULD I DO?





If anyone in your household has travelled outside of Canada in the last 14 days, the person who travelled is required to self-isolate for 14 days. Everyone in the household will also need to stay home **from school** until the person who travelled completes the 14 day quarantine. If the individual is exempt from travel quarantine because they perform an essential job (e.g. truck driver, pilot), the rest of the household can still attend school.

TORONTO.CA/COVID19

TORONTO Public Health