

COVID-19 Daily Self Checklist

If you check "yes" to more than one question below and suspect you might have COVID-19 or have been exposed:

* Students please notify your instructor, attendance clerk and/or campus administrator

* Staff should notify their supervisor

Do you have a fever (temperature of 100.4°F or above) without having taken any fever reducing medications?

- Yes
- No

Loss of Smell or Taste?

- Yes
- No

Muscle Aches?

- Yes
- No

Chills?

- Yes
- No

Cough?

- Yes
- No

Fatigue?

- Yes
- No

Shortness of Breath?

- Yes
- No

Sore Throat?

- Yes
- No

Headache?

- Yes
- No

Congested?

- Yes
- No

Have you experienced any gastrointestinal symptoms such as nausea/vomiting, diarrhea, loss of appetite?

- Yes
- No

Have you, or anyone you have been in close contact with been diagnosed with COVID-19, or been placed on quarantine for possible contact with COVID-19?

- Yes
- No

Have you been asked to self-isolate or quarantine by a medical professional or a local public health official?

- Yes
- No

IMPORTANT: Wash reusable masks regularly, according to CDC guidelines