



Your student is being sent home today _____ because of the following COVID symptom(s):

- Headache
 - Fever \geq 100.4
 - Fatigue
 - Muscle or body aches
 - Shortness of breath
 - Cough
 - Sore throat
 - Congestion
 - New loss of sense of taste or smell
 - Nausea or vomiting
 - Diarrhea
 - Abdominal pain
 - Unable to participate in normal school activities
- Close contact of a COVID positive person: YES – NO
- Family member has a COVID symptom(s): YES – NO

Your student may return:

After a negative COVID test with documentation or

Alternative diagnosis received from a physician or

After quarantine on _____.