

Coach's Name:	Health Self-Assessment Log

(Under order of the Public Health Officer, coaches must undergo a symptom check prior to coming to school. Please check your symptoms at home, select Y=Yes and N=No and record, except for temperature reading, record actual temperature. If you answer YES to any of the below questions or your temperature reading > 100.4 °F, under order of the Public Health Officer you must stay home. For weekends draw a line through the date. If you have questions please contact your school nurse. Please have a pre-arranged method for cancelling your practices ready to implement.)

symptom check	Date														
COVID19 exposure in last 10 days?															
Feeling Sick?															
Temperature Reading (must be < 100.4 °F)															
Dry Cough?															
Shortness of Breath?															
New developments with skin (rash, swelling, etc.)?															
Headache?															
Sorre Throat?															
Loss of Smell or Taste															
Gastrointestinal Symptoms?															