



Student Name: _____

Date: _____

School: Lavelle Prep New Ventures Nicotra Early College

Student Health Screening Questionnaire

Screening should be performed prior to leaving home if possible.

1. Has the student experienced a temperature of 100.0 degrees F or greater, a new cough, new loss of taste or smell, or shortness of breath within the past 10 days?
 No. Go to the next question.
 Yes. No further screening is needed. You may not enter the school. Parents/guardians must notify the school.
2. In the past 10 days, has the student tested positive for COVID-19 using a test that tested saliva or used a nose or throat swab (not a blood test)? (10 days measured from the date tested, not the date you received the test result.)
 No. Go to the next question.
 Yes. No further screening is needed. You may not enter school. Parents/guardians must notify the school.
3. To the best of your knowledge, in the past 14 days, has the student been in close contact (within 6 feet for at least 10 minutes) with anyone while they had COVID-19?
 No. Go to the next question.
 Yes. No further screening is needed. You may not enter the school. Parents/guardians must notify the school.
4. In the past 14 days, has the student traveled internationally or returned from a state that was identified by New York State as having widespread community transmission of COVID19 (other than just passing through the restricted state for less than 24 hours)? (Visit <https://coronavirus.health.ny.gov/covid-19-travel-advisory> for applicable states.)
 No. You may enter to the school.
 Yes. No further screening is needed. You may not enter the school.