



North East School Division

Box 6000, 402 Main St.
Melfort, SK S0E 1A0

Phone: (306) 752-5741
Fax: (306) 752-1933

Toll Free: 1-888-752-5741
Website: www.nesd.ca

Daily Screening Questionnaire for COVID-19

Parents / Guardians / Students / Staff must use this risk assessment each day to decide if the student should enter a school or NESD facility.

1.	Do you, or your child attending school, have any of the following symptoms:	Check one	
	<ul style="list-style-type: none">Fever	<input type="radio"/> YES	<input type="radio"/> NO
	<ul style="list-style-type: none">Cough	<input type="radio"/> YES	<input type="radio"/> NO
	<ul style="list-style-type: none">Headache	<input type="radio"/> YES	<input type="radio"/> NO
	<ul style="list-style-type: none">Muscle and/or joint aches and pains	<input type="radio"/> YES	<input type="radio"/> NO
	<ul style="list-style-type: none">Sore throat	<input type="radio"/> YES	<input type="radio"/> NO
	<ul style="list-style-type: none">Chills	<input type="radio"/> YES	<input type="radio"/> NO
	<ul style="list-style-type: none">Runny nose	<input type="radio"/> YES	<input type="radio"/> NO
	<ul style="list-style-type: none">Nasal congestion	<input type="radio"/> YES	<input type="radio"/> NO
	<ul style="list-style-type: none">Conjunctivitis	<input type="radio"/> YES	<input type="radio"/> NO
	<ul style="list-style-type: none">Dizziness	<input type="radio"/> YES	<input type="radio"/> NO
	<ul style="list-style-type: none">Fatigue	<input type="radio"/> YES	<input type="radio"/> NO
	<ul style="list-style-type: none">Nausea/vomiting	<input type="radio"/> YES	<input type="radio"/> NO
	<ul style="list-style-type: none">Diarrhea	<input type="radio"/> YES	<input type="radio"/> NO
	<ul style="list-style-type: none">Loss of appetite (difficulty feeding for children)	<input type="radio"/> YES	<input type="radio"/> NO
	<ul style="list-style-type: none">Loss of sense of taste or smell	<input type="radio"/> YES	<input type="radio"/> NO
	<ul style="list-style-type: none">Shortness of breath	<input type="radio"/> YES	<input type="radio"/> NO
	<ul style="list-style-type: none">Difficulty breathing	<input type="radio"/> YES	<input type="radio"/> NO
2.	Have you been identified as a close contact by Public Health?	<input type="radio"/> YES	<input type="radio"/> NO

If you have answered “**Yes**” to any of the above questions, please **DO NOT** enter the school/NESD facility at this time. Please stay home and use the [Saskatchewan COVID-19 Self-Assessment Tool](#).

If you have answered “**No**” to all the questions above, you may attend school/NESD facility.