

**Kenton County Schools**  
**COVID-19 Back to School for Students**



To keep our students, families, employees and community safe we are following state and local health official's recommendations as we reopen schools for 2020-21. This includes completing a COVID-10 Back to School for Students Questionnaire. Please complete the information below for each child enrolled in a Kenton County School for the 2020-21 school year.

Student Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ School \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Parent/Guardian Contact Phone #: \_\_\_\_\_

Has student been ill in the last 3 weeks?  Yes  No

Has student experienced any of the following symptoms over the last 3 weeks:

Symptom	Yes	No	If yes, please explain:
Fever			
Body Chills or New Rash			
Extreme Fatigue			
New Uncontrolled Cough			
Pain/Difficulty Breathing			
Shortness of Breath			
Sore Throat			
Body/Muscle Aches			
Loss of Taste or Smell			
GI symptoms (Vomiting/diarrhea)			
Changes in vision/eye discharge			

Has student been previously or is currently diagnosed with COVID-19?

Yes  No If yes, please explain: \_\_\_\_\_

To the best of your knowledge, has student had any direct contact with someone that has a suspected or lab confirmed case of COVID-19?

Yes  No If yes, please explain: \_\_\_\_\_

Has student been self-quarantined due to suspected exposure or symptoms of COVID-19?

Yes  No If yes, please explain: \_\_\_\_\_

Please list (and date) any places you have traveled outside the state of Kentucky within the last 14 days:

\_\_\_\_\_

**\*\*\*If you answer yes to any of the above questions, you may be contacted by a school/district representative for additional information\*\*\***

By signing below I acknowledge that:

- I commit to self-monitoring my child's temperature daily and will keep him/her home if they have a temperature at or above 100.4
  - Temperature will be checked at the school facility as well
- I will keep my child home if they are sick (see COVID-19 symptoms above)
  - Sick children may be isolated from well students until they can leave the school; prompt pick up of sick students is required
- Cloth face coverings/masks will be required when students are on the bus
- Social distancing (currently 6 feet) will be maintained as much as possible
- Students will be required to wear a cloth face covering/mask if social distancing cannot be maintained
  - Please provide your child with a mask if possible; if not possible please notify your school
- I will notify my child's school to self-report if he/she develops symptoms of COVID-19, has a positive test for COVID-19, or was exposed to someone with COVID-19 within the last 14 days.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For internal use only: Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_