Home Screening Procedure

Please keep your child home if:

- there are any of the following symptoms and/or
- the answer is YES to any of the questions below:

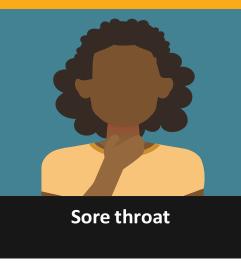














Additional symptoms: congestion or runny nose, nausea, vomiting, diarrhea

- Has your student had any close contact with someone who is suspected or confirmed to have had COVID-19 in the past 14 days?
- Has your student traveled in the prior 14 days outside of New Hampshire, Vermont, Maine, Massachusetts, Connecticut, or Rhode Island?
- Has your student had any over the counter fever-reducing medication in the last 24 hours?

Please check your student's temperature before they leave home in the morning.

Temperatures will be checked again when they arrive at school.

If it is higher than 100.0F or if they show any of the above symptoms, a parent or emergency contact will be contacted to pick up the student.

Thank you for helping to keep our students, families, and staff healthy and safe.

