



Powell United Methodist Church Preschool

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COVID-19 HEALTH CARE SCREENING FOR PUMC Kindergarten Enrichment ATTENDANCE

To minimize the risk of transmission of COVID-19 and to take precautions to keep all students and staff healthy, **we ask you to review all of the following questions before your child attends KE.** Please consider this list each day your child is scheduled to attend class. If you answer **YES** to any of the following questions, please call the preschool office 614-847-3773 to report your child's absence.

At this time, we are asking all parents and staff to wear a mask at arrival and dismissal. Hand washing will take place at arrival and several times during the preschool day. Staff and children's temperatures will be taken upon arrival for the day. Temperatures cannot be 100' or higher to attend.

1. Have you or your child been in close contact with anyone who was confirmed/suspected to have COVID-19 in the past 14 days?
2. Have you or your child traveled outside of Ohio in the past 14 days?
Where: _____
3. Have you or your child had a fever of 100' or higher in the past 48 hours without medication?
4. Have you or your child had a cough or shortness of breath in the past 24 hours?
5. Have you or your child had a recent loss of smell, taste or a sore throat?
6. Do you or your child have any cold or flu symptoms (ex: muscle pain, severe headache, vomiting, diarrhea, rash, abdominal pain, red/pink eye(s), overall weakness?)

Having this information and confirming represents your full understanding of the risks and benefits of attending school during the COVID-19 pandemic. Our mutual goal is to provide every reasonable step to slow the spread of this virus to the Kindergarten Enrichment class.

Please sign that you have received this information and your child will attend with good health to the best of your knowledge.

Child's Name _____ Class _____
Parent: _____ Date: _____

Return to preschool office by first day of class