

Dear Parent,

Date: -----

You are requested to prepare the Health Checklist of your ward (as mentioned below) before sending him/her to school and submit the same to school on everyday as per the consent already given by you for your ward to attend the physical school as per the circular regarding re-opening.

Stay safe and healthy.

Regards

AK Sharma  
(Principal)

### HEALTH SELF DECLARATION PROFORMA

Name of the Child \_\_\_\_\_ Admission No. \_\_\_\_\_ Class \_\_\_\_\_ Sec \_\_\_\_\_

1. Cough (Yes/No) - \_\_\_\_\_

2. Fever (Yes/No) - \_\_\_\_\_

3. Cold (Yes/No) - \_\_\_\_\_

4. Exposure to anyone with COVID (Yes/No) - \_\_\_\_\_.

5. Temperature reading taken in the morning - \_\_\_\_\_ F

6. Any visit out of town of child or family staying in the same house \_\_\_\_\_

7. Is your home in containment zone? (Yes/No) \_\_\_\_\_

If yes, then your ward should follow isolation and attend the physical school only when containment zone tag is lifted.

Date :

Place:

(Signature of Parent)

Name of Parent -