

Fort Belknap Indian Community



Fort Belknap Agency
656 Agency Main Street
Harlem, Montana 59526-9455
PH: (406) 353-2205
FAX: Council – (406) 353-4541
FAX: Departments – (406) 353 - 2797

Fort Belknap Indian Community
(Tribal Govt.)
Fort Belknap Indian Community
(Elected to administer the affairs of the community and
to represent the Assiniboine and the Gros Ventre Tribes
of the Fort Belknap Indian Reservation)

MEMORANDUM:

May 7, 2020

TO: All Tribal Directors/Program Managers
All Tribal Employees

FR: Delina Cuts The Rope, Acting CAO 

RE: COVID-19 Visitor Screening Form

As an added COVID-19 safety measure to further protect all tribal employees in the workplace, you are strongly encouraged to utilize the attached “COVID-19 Visitor Screening Form” developed by Dr. Jen Show, to screen all incoming visitors and public entering our office(s).

Directors please see that each of your staff have copies of the form, especially your front line workers who receive visitors and public first such as administrative assistants, clerks, secretaries, and receptionists so that they may inquire if someone has symptoms, has been exposed or traveled from hot spot areas. If any visitor or member of the public answers yes to any of the visitor screening form questions you are advised to politely and professionally inform them that they are not to enter any further into the office and are to be immediately referred to our local PHN and/or Tribal Health Department for guidance on further safety measures or appropriate recommendations as needed.

Your cooperation with this added task is appreciated and is intended to reduce potential risk to everyone, reduce employee quarantine time and temporary office closures, and to maintain steady tribal government services to the public.

If you have any questions please feel free to contact Tribal Health Department at 353-2525.

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FORT BELKNAP COVID-19 VISITOR SCREENING FORM		
Date of Screening:	Time of Screening:	
Visitor Name:	Department Visited:	
Place of Residence:		

Do you have any of these symptoms?		
<ul style="list-style-type: none"> • Cough • Fever of 100.4 or higher • Chills • Shortness of Breath • Sore Throat • Muscle Aches 	YES	NO
Are you visiting from an area with active cases of COVID-19? If so where?	YES	NO
Have you had exposure to someone with, or under investigation for COVID-19?	YES	NO

If you answered yes to any of the above questions, contact the Fort Belknap Public Health Nursing Office at 353.3250 or Fort Belknap Tribal Health at 353.2525.