

The KARE Crisis Nursery Inc.

**K**ids **A**ssistance & **R**espite in **E**mergencies

Visitor Screening Questionnaire

In an effort to protect our clients, families and employees from illness, we are screening visitors and volunteers: Thank you for your patience and understanding.

Please answer the following questions based on CDC’s Travel Guidance (Levels 2 and 3):

Yes No

Attending a large gathering or event increases your chance of being in [close contact](https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing/contact-tracing-plan/appendix.html#contact) with people outside your household and being exposed to COVID-19. Have you attended a large gathering in the past 14 days?

Yes No

I have been in close contact with people who have traveled to countries where COVID-19 is spreading within the past 14 day.

Yes No

Have you come into close contact (within 6 feet) with someone who has a laboratory-confirmed COVID-19 diagnosis in the past 14 days?

Yes No

I have been around people who are sick with colds or flu.

Yes No

Do you currently or in the past 14 days, have any signs or symptoms of a respiratory infection such as fever, cough, shortness of breath, body aches, nasal congestion, or sore throat?

Yes No

I have a fever, or have had a fever of 100.4° in the past week.

Yes No

I have been nauseated or have vomited or had diarrhea within the past week.

IF YOU HAVE MARKED YES TO ANY QUESTION; PLEASE ***DO NOT ENTER THE NURSERY*** AND POSTPONE YOUR VISIT FOR AT LEAST 14 DAYS AFTER THE START OF YOUR SYMPTOMS.

*\*\*Contact your healthcare provider if your symptoms get worse.\*\**

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Printed Name and Signature Current Temperature Staff Initials & date

***Thank you for your understanding!***