

COVID-19 Screening Questionnaire

As the coronavirus (COVID-19) pandemic continues, **Shades of Gray Dermagraphics** will be following the recommendations from the Centers for Disease Control and Prevention to ensure the safety of all clients. To prevent the spread of COVID-19 and reduce the potential risk of exposure to our clients, we are conducting a simple screening questionnaire. Your participation is important to help us take precautionary measures to protect you and everyone who

enters this shop.

Please respond carefully to the questions as you will be certifying via your signature that the responses you provide are true and accurate to the best of your knowledge.

	First Name:		Last Name:				
	Phone #:		Date:				
1.	Are you currently experiencing, or have you experienced in the past 14 days, cold or flu-like symptoms to include the following?						
	-Fever (100°F or great	er)	1	□ Yes	□ No		
	-New or worsening co	ough	ı	□ Yes	□ No		
	-Shortness of breath or difficulty breathing		I	□ Yes	□ No		
	-Sore throat		1	□ Yes	□ No		
	-Nausea/vomiting, dia	arrhea, abdominal pain		□ Yes	□ No		
2.	Have you traveled out the U.S. in the past 14	tside of the U.S. or have been in close 4 days? - No	proximity to ar	nyone that has	traveled outside of		
3.	Have you been tested	lave you been tested for COVID-19 and are waiting to receive test results?					
	□ Yes	□ No					
4.	Have you had close co	you had close contact with or cared for someone:					
	-with a confirmed or probable case of COVID-19		1	□ Yes	□ No		
	-with a respiratory illness		ı	□ Yes	□ No		
	-who was experiencing any of the above symptoms		ı	□ Yes	□ No		

Certification

I hereby certify that the responses provided are true and accurate to the best of my knowledge.									
Signature:		Date	:						
Temperature Reading:									
Note: The information collected on this form will be used to determine only whether you may be infected with COVID-19. The information on this form will be kept confidential.									
	Access to services:	□ Approved	□ Denied						
Notes:									