



### Sample Attendee COVID-19 Screening Form

Attendee Name: \_\_\_\_\_ Location/event: \_\_\_\_\_ Date: \_\_\_\_\_

#### Screening Questions

- 1. Do you have a fever or above-normal temperature (>100F)? YES \_\_\_ NO \_\_\_
- 2. Have you taken fever reducers in the past 72 hours? YES \_\_\_ NO \_\_\_
- 3. Have you been experiencing shortness of breath or having trouble breathing? YES \_\_\_ NO \_\_\_
- 4. In the past 72 hours, have you had a dry cough? YES \_\_\_ NO \_\_\_
- 5. In the past 72 hours, have you had a runny nose? YES \_\_\_ NO \_\_\_
- 6. In the past 72 hours, have you had a sore throat? YES \_\_\_ NO \_\_\_
- 7. Have you recently lost or had a reduction in your sense of smell or taste? YES \_\_\_ NO \_\_\_
- 8. In the past 72 hours, have you had any other flu-like symptoms, such as gastrointestinal upset, headache, muscle pain or fatigue? YES \_\_\_ NO \_\_\_
- 9. In the past 72 hours, have you had chills or repeated shaking with chills? YES \_\_\_ NO \_\_\_
- 10. Have you been tested for COVID-19? YES \_\_\_ NO \_\_\_  
If YES, date tested \_\_\_\_\_ & what is the result?  
\_\_\_ Positive \_\_\_ Negative \_\_\_ Awaiting result
- 11. In the last 14 days, have you been in contact with someone who has a confirmed case COVID-19, under investigation for COVID-19 or a respiratory illness? YES \_\_\_ NO \_\_\_
- 12. In the last 14 days, have you traveled to any foreign country? YES \_\_\_ NO \_\_\_  
If YES, where? \_\_\_\_\_
- 13. In the last 14 days, have you traveled outside of your island? YES \_\_\_ NO \_\_\_  
If YES, where? \_\_\_\_\_

*Reporting and communicating a positive COVID 19 test should be managed by a council staff member. Volunteers do not manage COVID-19 communication responsibilities.*

*COVID-19 incident response lead. Girl Scouts of Hawai'i has designated Kim Morris, COO as the COVID-19 incident response lead. Volunteers are directed to contact [Kim Morris](mailto:Kim.Morris@gschawaii.org) (808-675-5512) in the event of a COVID-19 positive test result. All health information is private/confidential to be shared only on a need to know basis. There are laws and regulations governing sharing of health data.*

**Council staff, NOT volunteers, will notify parents and others about a positive test result and that the tester's identity is confidential.**