

Health Condition Check Sheet

【To Parents/Guardians】 In order to prevent the spread of the Novel Coronavirus infection, we ask all parents/guardians and children to check their physical condition and provide their contact information.

Date : Year 2020 Month Day

Name(s) of parent(s)/guardian(s): _____ **Name(s) of child(ren):** _____

Address: _____

Phone Number: _____ () _____ (Someone who can be reached during the day)

※ In the event that your child takes a leave of absence from the facility for an extended period of time due to the effects of the novel coronavirus infection, etc., we may contact you to check the recent status of the child, etc.

	Checklist	Parent/ Guardian	Child
		✓	✓
1	My health condition is good.	<input type="checkbox"/>	<input type="checkbox"/>
2	My body temperature is () °C today. I have no fever higher than 1°C above normal.	() °C <input type="checkbox"/>	() °C <input type="checkbox"/>
3	I have no cold symptoms, such as a cough, runny nose, or fatigue, etc.	<input type="checkbox"/>	<input type="checkbox"/>
4	I have not been to the hospital nor have taken medication for fever or cold symptoms within the past 14 days.	<input type="checkbox"/>	<input type="checkbox"/>
5	My workplace, or the nursery-school/kindergarten that my child attends, has not been changed to work-from-home, nor closed down, in order to prevent the spread of the Novel Coronavirus infection.	<input type="checkbox"/>	<input type="checkbox"/>
6	I have not been notified by the Public Health Center that I have been in close contact with a Novel Coronavirus patient.	<input type="checkbox"/>	<input type="checkbox"/>
7	No one living in our residence has been notified by the Public Health Center that we are positive for the Novel Coronavirus.	<input type="checkbox"/>	<input type="checkbox"/>
8	I have not had contact with anyone traveling from a country where the infection is worsening, within the past 14 days.	<input type="checkbox"/>	<input type="checkbox"/>
9	I have not traveled to any country where the infection is worsening, within the past 14 days.	<input type="checkbox"/>	<input type="checkbox"/>

* If anyone that used the facility or any facility staff is found to be infected with the Novel Coronavirus, your information may be provided to the Public Health Center to inform them that you may have been in contact with an infected person.
We will only use your personal information within the scope of our objectives, and we will ask for your confirmation and consent in advance if we need to use it for other purposes.