

# GACTC High School Student Daily Health Screening



All individuals entering the GACTC must affirm the following questions each day. If you answer yes to any of the questions below, you may **NOT** enter the GACTC.

These measures are enacted for the health and wellbeing of **ALL** of our students & employees. Thank you for your understanding and cooperation.

1. Do you have a fever equal to or above **100.4** (without fever-reducing medication)?
2. Are you experiencing two or more of the following symptoms?
  - Fever
  - Chills
  - Headache
  - Diarrhea
  - Sore throat
  - Muscle aches
  - Nausea or vomiting
  - Congestion or runny nose
  - New loss of taste or smell
  - Fatigue
  - Cough
  - Shortness of breath/difficulty breathing

If you answered YES to any of the questions above – PLEASE STAY HOME and consult with your doctor.

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High School students that test positive or have been exposed to someone with COVID-19, should follow their sending school's COVID-19 protocol.