Ottawa Islamic School

10 Coral Ave, Ottawa, Ontario K2E 5Z6 Tel: 1.613.727.5066 | Fax: 1.613.727.8486 |

COVID-19 Screening Tool

Do you have any of the following new or worsening symptoms?



Fever/Chills



Cough



Difficulty breathing/ Shortness of breath



Sore throat/ Difficulty swallowing



Runny nose (unrelated to seasonal allergies)



Loss of taste or smell



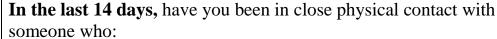
Not feeling well, headache, unexplained tiredness and muscle aches

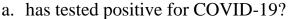


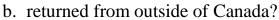
Nausea, vomiting, diarrhea, abdominal pain

If yes, stay home and self-isolate. If no, answer the following question.











c. was sick with a respiratory illness such as a cough, fever, or difficulty breathing?

If yes, stay home and self-isolate. If no, answer the following question.



In the last 14 days, have you travelled outside of Canada?

If yes, stay home and self-isolate. If no, see the message below.

If you answered "NO" to all questions, you may go to school today.

** Please complete this screening tool daily before attending school and save it on your Google Drive and shared with ttariq@myois.org

I have answered "NO" to all questions.	
Name:	Date:
Signature:	