



CHILTON INDEPENDENT SCHOOL DISTRICT

BRANDON HUBBARD, SUPERINTENDENT
JENNIFER SHARP, SECONDARY PRINCIPAL
CANDICE ROSS, ELEMENTARY PRINCIPAL
AMBER LIPSEY, DISTRICT COUNSELOR
CHRIS JAMES, ATHLETIC DIRECTOR

COVID-19 Screening Form for District Students and Visitors

Due to the COVID-19 pandemic, and in an attempt to minimize the spread of the virus, the Chilton ISD is required to screen all students, parents, and visitors entering and leaving a school facility. In order to be granted access to District facilities, all visitors must truthfully complete and submit the following:

I, _____, hereby affirm that:

1. While on District property I will maintain a minimum of 6 feet of separation from any other individuals not within my household.
2. I have not in the past 7 days exhibited any of the known symptoms of COVID-19, including:
 - Cough
 - Shortness of breath or difficulty breathing
 - Chills
 - Repeated shaking with chills
 - Unexpected muscle pain
 - Headache
 - Sore throat
 - Loss of taste or smell
 - Diarrhea
 - Running a fever (or measuring a temperature of 100.0 degrees Fahrenheit or more)
3. In the past 14 days I have not been in contact with any person known to have contracted COVID-19.

Although not required, I understand it is recommended that I wear a cloth face covering (over the nose and mouth), or non-medical grade face masks, if available. I also understand that it is recommended that I follow the minimum standard health protocols issued by the Texas Department of State Health Services and cited by the Texas Governor in his Executive Orders related to the pandemic.

I understand that the virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in the DSHS protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

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P.O. Box 488 • Chilton, Texas 76632 • Phone (254) 546-1200 • Fax (254) 546-1201 • www.chilton.org
An Equal Opportunity Employer



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I understand that the District cannot guarantee that I will not contract the virus, even when implementing screening protocols. I acknowledge that I am assuming the risk that I may contract the virus by entering District facilities, even when screening protocols are implemented.

I understand that the Chilton Independent School District is voluntarily permitting me to attend graduation activities on the basis that I have truthfully made the above statements, and I sign below to confirm the truth of the above.

Printed Name

Signature

Date

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