



Individual School Data Tracking

Principal Name:	School Name:
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School Nurse:

School Enrollment:

of Faculty & Staff:

DATE:											
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STUDENTS

# Absent											
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# Absent with CLS											
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# Sent home with CLS											
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FACULTY and STAFF

# Absent											
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# Absent with CLS											
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# Sent home with CLS											
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**CLS-COVID Like Symptoms-Fever of 100.4 or higher, cough, shortness of breath, nausea, diarrhea, muscle/body aches, loss of taste or smell*

Please note any unusual CLS activity in your school below: