

I certify that to the best of my knowledge my household and I comply with the following standards:

1. We do not have and have not had, in the last 14 days a temperature of 100.4°F or above.
2. We do not have signs or symptoms of a respiratory infection, such as a cough, shortness of breath, sore throat, and low-grade fever.
3. In the previous 14 days we have not had contact with someone with a confirmed diagnosis of COVID-19; is under investigation for COVID-19; or is ill with a respiratory illness; or in the previous 14 days has travelled internationally or domestically to any state currently on the State of Texas mandatory quarantine list or to countries with widespread, sustained community transmission.

Signature

Date

Printed Name

Must be signed weekly by anyone entering the building, dropping off or picking up a child.