



School District 105

Countryside • Hodgkins • La Grange
701 S. Seventh Ave.
La Grange IL 60525-2798

Phone: (708) 482-2700
Fax: (708) 482-2727
Website: www.d105.net

Student/Staff Self Certification and Verification Form

Name of Student(s)/Staff Member: _____

School _____ Grade Level: _____

School District 105 will no longer be requiring daily completion of the COVID-19 self-certification (MyMedBot app) or temperature checks at school. However, **staying at home when sick and getting tested and/or following up with a healthcare provider remains critical to preventing COVID-19 spread within our schools.** We are requiring that all student families and staff members sign and return this form **by 8/25/2021.**

By sending my student on District 105 transportation and/or reporting to a District 105 school on any given day, I am certifying that none of the following apply to me/my child:

- A positive COVID-19 (coronavirus) test result/diagnosis with COVID-19 within the past 10 days.
- Waiting for a COVID-19 test result due to symptoms of COVID-19 or possible close contact with someone with COVID-19 or with COVID-19 symptoms.
- Close contact (within 6 feet for 15 minutes or more) with a person who has COVID-19 or has COVID-19 symptoms (may report to school if fully vaccinated=at least 2 weeks after receiving the second dose in a 2-dose series or at least 2 weeks after receiving a single-dose vaccine OR within 90 days of a positive COVID-19 test).
- ANY of the following symptoms today or within the past 10 days. Note symptoms apply to all individuals including those who have been fully vaccinated and/or are within 3 months of a positive COVID-19 test.
 - Fever (100.4 F or higher). **Never give medication to reduce the fever and then report to school.**
 - New* onset of moderate to severe headache
 - Shortness of breath
 - New* cough
 - Sore throat
 - Vomiting
 - Diarrhea
 - New* loss of taste or smell
 - Fatigue from an unknown cause
 - Muscle or body aches from an unknown cause

*New means that the symptom is not caused by a condition that has already been diagnosed such as allergies or migraine headaches. If the symptom is consistent with the diagnosed condition in type of symptom(s) and severity, it would not be considered new.

If any of the above apply to me/my student, I will contact the school nursing office as soon as possible and understand that IDPH guidelines must be met before a return to school in person is allowed <https://www.isbe.net/Documents/IDPH-COVID19-Exclusion-Decison-Tree.pdf>.

Parent/Guardian Signature _____ Date _____



THE D105 DIFFERENCE

Gurrie • Hodgkins • Ideal • Seventh Avenue • Spring Avenue