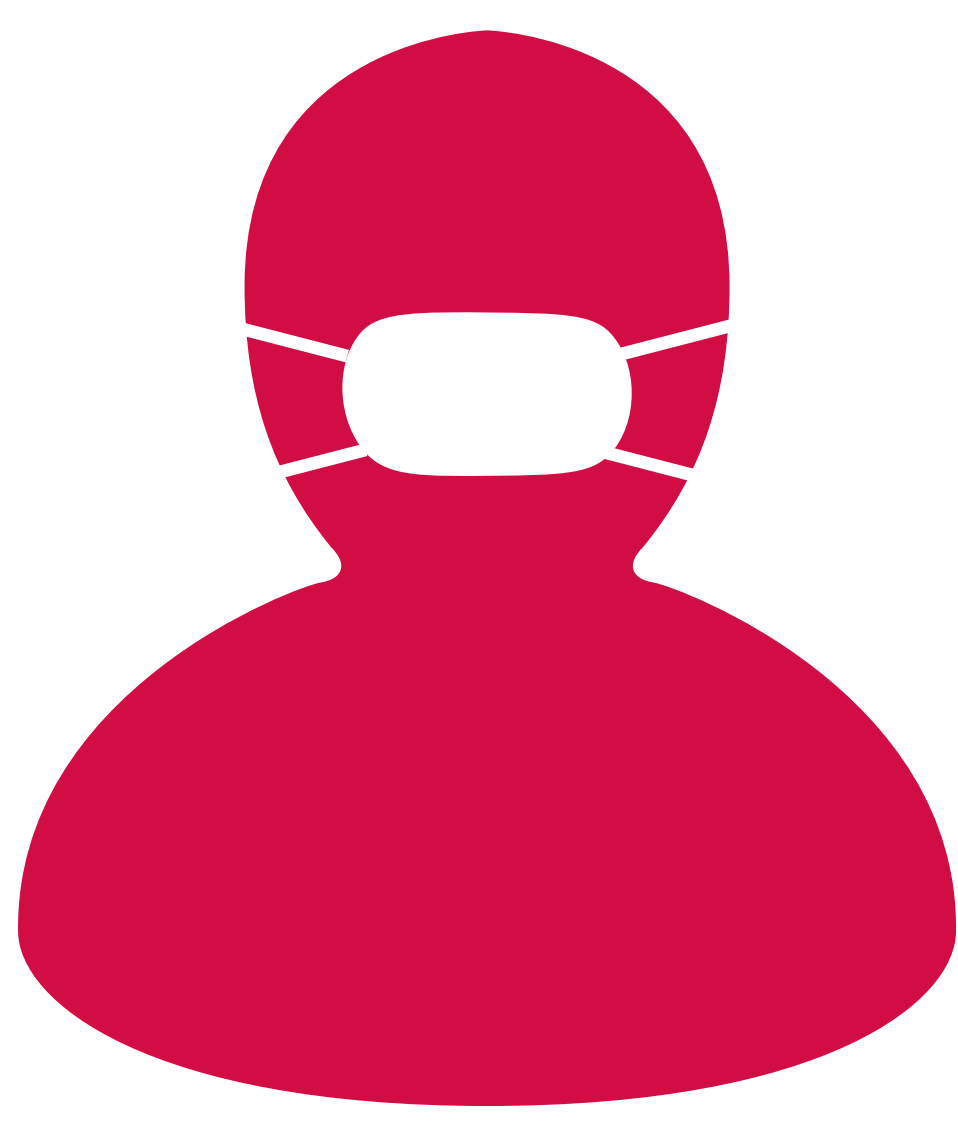


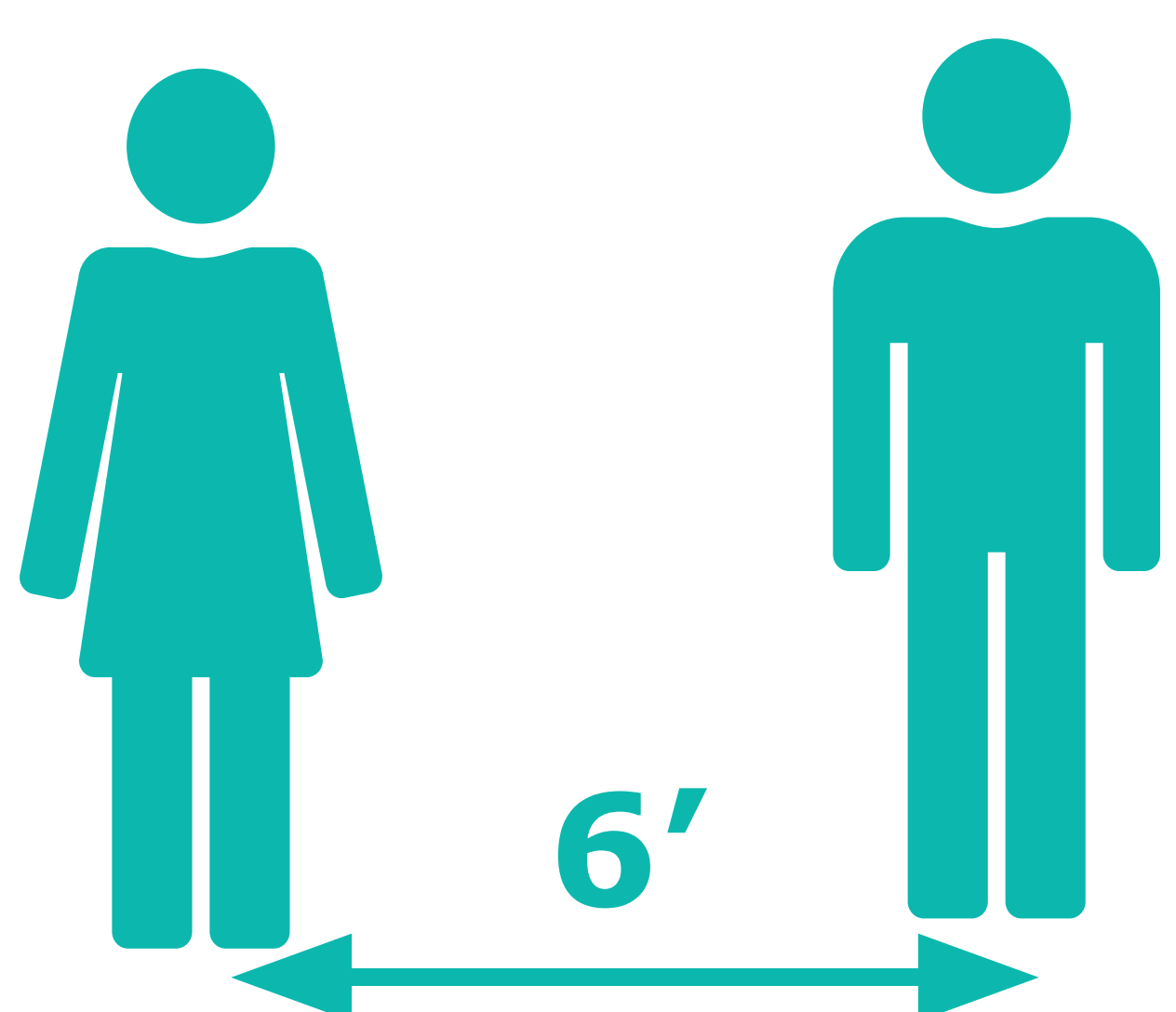
PLEASE ANSWER THE FOLLOWING QUESTIONS

- Are you currently experiencing any of the following symptoms?**
 - Fever (>100.4°F, 38°C) or symptoms of a fever such as chills or severe shivering
 - Muscle or body aches
 - Cough not otherwise explained
 - Shortness of breath or difficulty breathing
 - Vomiting or diarrhea
 - New loss of taste or smell
- Has there been an exposure to someone diagnosed with COVID-19, either household or non-household contact?**
- Have you been advised by a healthcare provider or the county health department to self-quarantine?**
- Have you traveled within the last 14 days in a state or country identified as a hot spot for COVID-19?**
 - Refer to KDHE travel guidelines at bit.ly/kdhetravel

IF YOU ANSWERED NO TO ALL OF THE QUESTIONS ABOVE, YOU MAY ENTER THE BUILDING.



FACE COVERING REQUIRED



RESPECT SOCIAL DISTANCE



WICHITA PUBLIC SCHOOLS®