



COVID19 Pre-Screening Questionnaire

	Day 1 (July 4, 2020)
1. In the past 14 days were you exposed to someone who is under investigation for COVID19 or has been confirmed of having COVID19?	Yes No
2. In the past 14 days have you returned from international travel? <i>If yes, please state where:</i>	Yes No
3. Are you or anyone in your household experiencing any flu like symptoms? a. Temperature greater than 38C b. Cough c. Shortness of breath d. Chills e. Sore Throat f. Muscle or joint pain <i>If yes, circle the symptoms you're experiencing.</i>	Yes No
In the past 14 days have you travelled outside of Saskatchewan? <i>If yes, please state from where:</i>	Yes No
Signature:	Printed Name:

Failure to meet SCDRA standards can result in denial of entry.