

WYIS Health Registration Form (Post-Holiday)

武汉长江国际学校假期健康情况登记表

STUDENT NAME 学生姓名: _____ **GRADE** 年级: _____

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|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Date 日期 | | | | | | | | | | | | | | |
| Temperature 体温 | | | | | | | | | | | | | | |
| <i>If you have any symptoms of fever, coughing, or difficulty with breathing, please record here:</i> 如果出现了发热、咳嗽、呼吸困难等症状, 请在此记录说明: | | | | | | | | | | | | | | |

If you traveled outside Wuhan within 14 days of your first day back to WYIS, please record the information below:
以上 14 天内, 如果有离开武汉的情况, 请填写下表。

| Date left Wuhan 离汉日期 | Date returned to Wuhan 返汉日期 | City Name 城市名称 | Remarks 备注 |
|-------------------------|--------------------------------|-------------------|---------------|
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To ensure COVID-19 epidemic prevention and control, I solemnly promise as follows:

为切实做好新冠肺炎疫情防控, 我郑重承诺如下:

1. The above information is true and accurate. 以上填写信息均真实准确。
2. In the past 14 days, my family members and I have been in good health, without fever, cough, or difficulty with breathing. According to the requirements of the school, we will monitor our temperatures at home and stay home from school if fever or other COVID-type symptoms.
返校前 14 天, 本人及家庭成员身体健康, 没有发热、咳嗽、呼吸困难等症状。按照学校要求, 做好家中测温, 绝不带病到校参加学习。
3. I solemnly promise that the above is true. If there is any misinformation that causes COVID-19 to spread at WYIS, I understand I am responsible for any resulting consequences.
本人郑重承诺, 以上情况如有瞒报、谎报、造成新冠肺炎疫情在学校传播的, 一经查实, 由本人承担相应的法律和经济责任。

Parent Signature: _____ Date(mm/dd/yy): _____

家长签字: _____ 日期: _____