



Date:

Stable Group:

COVID-19 Daily Attendance Log

	CHILD NAME (First, Last)	IN TIME	WHO DROPPED OFF?	OUT TIME	WHO PICKED UP?	HEALTH CHECK COMPLETE*	
						Pass	Fail
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							

Date:

Stable Group:

COVID-19 Daily Staff Log

	STAFF NAME OR OTHER ADULT (First, Last) Name of any caregiver, staff member, or adult who enters the program	IN TIME	OUT TIME	IN TIME	OUT TIME	HEALTH CHECK COMPLETE*	
						Pass	Fail
1							
2							
4							
5							
6							
7							
8							
9							

*Health Check Questions

See [ELD COVID-19 Guidelines](#) document for response protocols¹

1. Has the adult or child been exposed to a person with a positive case of COVID-19 in the past 14 days? And if so, was the exposure during the time from 2 days before until 10 days after the person with COVID-19 started having symptoms? If the person with COVID-19 never had symptoms, use the time period of 2 days before the test was taken until 10 days after as the infectious period.
2. Has the adult or child been exposed to a person with a presumptive case of COVID-19 in the past 14 days? And if so, was the exposure during the time from 2 days before until 10 days after the person with presumptive COVID-19 started having symptoms?
3. Is the adult or child experiencing new loss of taste or smell, an unusual cough, shortness of breath, or fever? "Unusual cough" means something not normal for this person (e.g., allergies, asthma).

¹ Refer to <https://oregonearlylearning.com/COVID-19-Resources>. "Health and Safety Guidelines for Child Care and Early Education Operating During COVID-19." Published 8/14/2020, updated January 2021.