2022年秋季开学师生个人自我健康状况监测记录表

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 教职员工  或学生姓名 | |  | | | | | 性别 | | | |  | | | | | 年级 | |  | | | | 班级 | | |  | |
| 住址 | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| 假期是否前往境外或国内疫情中高风险地区 | | | | | | |  | | | | 前往  时间 | | | | |  | | 返回  时间 | | | |  | | | | |
| 假期是否接触过确诊或  疑似病例 | | | | | | |  | | | | 接触时间 | | | | |  | | 是否  隔离期满 | | | |  | | | | |
| 假期是否与疫情中高风险地区返岳人员密切接触 | | | | | | | | | | | | | | | |  | | 接触  时间 | | | |  | | | | |
| 本人是否为确诊病例 | | | | | | |  | | | | | | | | | 本人是否为疑似病例 | | | | | |  | | | | |
| 当前是否健康 | | |  | | | | 体温是否正常 | | | | | |  | | | | | 其他  症状 | | | |  | | | | |
| 是否接种了  新冠疫苗 | | |  | | | | 完成全程接种  疫苗时间 | | | | | |  | | | | 未接种疫苗的禁忌症说明 | | | | |  | | | | |
| **开学前21天体温监测记录（逐日记录体温状况）** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 日期 |  | | |  | |  | |  | |  | | | |  | | |  | |  | |  | | |  | |  |
| 体温 |  | | |  | |  | |  | |  | | | |  | | |  | |  | |  | | |  | |  |
| 日期 |  | | |  | |  | |  | |  | | | |  | | |  | |  | |  | | |  | |  |
| 体温 |  | | |  | |  | |  | |  | | | |  | | |  | |  | |  | | |  | |  |
| **家庭其他成员健康状况** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 姓名及关系 | | | | | 假期是否前往疫情敏感地区 | | | | 假期是否接触过确诊或疑似病例 | | | | | | 是否为  确诊病例 | | | | | 是否为  疑似病例 | | | 是否完成  新冠疫苗  全程接种 | | | |
|  | | | | |  | | | |  | | | | | |  | | | | |  | | |  | | | |
|  | | | | |  | | | |  | | | | | |  | | | | |  | | |  | | | |
|  | | | | |  | | | |  | | | | | |  | | | | |  | | |  | | | |
| 填报人签名 | | | | |  | | | | | | | 填报日期 | | | | | | | | | |  | | | | |

注：1.疫情中高风险地区根据当日国家政务服务平台提供的信息为准；2.体温高于37.2度为异常；

3.教职员工和学生家长须如实填写并对所填内容真实性负责，在开学报到时交学校存档。