



Name: \_\_\_\_\_ Signature \_\_\_\_\_

Prior to starting your volunteer day you must ask yourself 2 questions below, and take your temperature with the thermometer provided. After each use, record your temperature on this sheet, wipe down the thermometer with disinfectant wipes.

**Return this log sheet to your volunteer supervisor once a month.**

Questions to ask yourself daily:

1. Have you had any of the following symptoms in the last 24 hours:
  - a. Fever, chills, cough, sore throat, persistent sneezing or runny nose, difficulty breathing, fatigue, body aches, unusual headache, loss of taste or smell, nauseous or vomiting, or diarrhea?
2. Has anyone in your household had a fever in the last 24 hours?

**If “yes: to either question above, please notify your volunteer supervisor right away.**

Date	Do you feel well (no Covic-19 related symptoms) (circle one)		Has anyone in your household had a fever in the last 24 hours? (circle one)		Time	Temperature Reading	Initials
	YES	NO	YES	NO			
	YES	NO	YES	NO	AM/PM		
	YES	NO	YES	NO	AM/PM		
	YES	NO	YES	NO	AM/PM		
	YES	NO	YES	NO	AM/PM		
	YES	NO	YES	NO	AM/PM		
	YES	NO	YES	NO	AM/PM		
	YES	NO	YES	NO	AM/PM		
	YES	NO	YES	NO	AM/PM		
	YES	NO	YES	NO	AM/PM		
	YES	NO	YES	NO	AM/PM		
	YES	NO	YES	NO	AM/PM		
	YES	NO	YES	NO	AM/PM		
	YES	NO	YES	NO	AM/PM		
	YES	NO	YES	NO	AM/PM		
	YES	NO	YES	NO	AM/PM		

**If you have answered “yes” to any of the questions above, you may not volunteer.**

**You can return 14 days from today or 3 days after the end of any symptoms.**

**If you are not feeling well while you are volunteering, tell you supervisor immediately.**

CitySERVE a program of the Volunteer Center  
 809 Center St. Rm 6  
 831-5403

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