



## EPHESUS SEVENTH-DAY ADVENTIST CHURCH

23 Gage Avenue Scarborough, ON M1J 1T3

Pastor Leonard Northe

### COVID-19 SCREENING

**1. Do you have any of the following symptoms:**

- fever, cough, runny nose, sore throat
- trouble swallowing; difficulty breathing
- loss of taste or smell
- nausea, vomiting or diarrhea?

Yes  No

**2. Have you traveled outside of Canada in the past 14 days?**

Yes  No

**3. Have you been in close contact with someone who is sick or has confirmed COVID-19 in the past 14 days?**

Yes  No

**If you have answered 'YES' to any of these questions, please go home and self-isolate right away. Call TELEHEALTH (1-866-797-0000), or your health care provider to find out if you need a test.**

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**I understand the questionnaire above and have answered the questions truthfully and voluntarily. I further understand this information is collected for the purpose of contact tracing by Toronto Public Health. It will be securely filed and shredded after thirty (30) days.**

**Name (Print): \_\_\_\_\_ Signature \_\_\_\_\_**

**Date: \_\_\_\_\_ Contact number: \_\_\_\_\_**

**Temperature: \_\_\_\_\_**