Self-Certification Instructions for Parents/Students

- 1. Open up a web browser (Chrome, FireFox etc.) on a computer or mobile device.
- 2. Navigate to <u>https://nb27.survey.health/</u> which can also be found on the District 27 website under the 2020-2021 School Year Tab.

hb27.survey.health		*
	COVID-19 Daily Self-Certification Survey	
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- 3. Type in your student's ID Number (found on the front of their ID card).
- 4. Type in your student's date of birth in 01/01/2020 format.
- 5. Click "Sign In."
- 6. You should see your student's name, ID, and today's date at the top of the screen.
- 7. Answer the four questions and click "Confirm."

Have you experienced any of the following?					
 1. Have you experienced any of the following symptoms in the past 24 hours: Fever (100.4°F or higher) Chills (or shaking chills) Cough Shortness of breath or difficulty breathing Fatigue (feeling tired) Muscle or body aches Headache New loss or decrease of taste or smell Sore throat Congestion or runny nose Nausea or vomiting Diarrhea 	NO	YES			
2. Have you been diagnosed with COVID-19 in the past 14 days?	NO	YES			
3. Have you been in contact with anyone who has been diagnosed with COVID-19 in the past 14 days?	NO	YES			
4. Have you traveled outside of the State of Illinois within the last 14 days?	NO	YES			
CANCEL					

- 8. Answering "Yes" to any of the questions will result in a message telling you your student should not attend school today. Please contact your student's school office to notify them.
- 9. If all answers are "No," then your student will be ready to attend school today.

	Have you experienced any of the following] ?			
	1. Have you experienced any of the following symptoms in the past 24 hours: Fever (100.4°F or higher) Chills (or shaking chills) Cough Shortness of breath or difficulty breathing Fatigue (feeling tired)	NO	YES		
Check In Confirmed					
	Thank you for completing the health questionnaire. We look forward to seeing you at school today!		\checkmark		
	ок				
	3. Have you been in contact with anyone who has been diagnosed with COVID-19 in the past 14 days?	NO	YES		
	4. Have you traveled outside of the State of Illinois within the last 14 days?	NO	YES		
	CANCEL				

10. Click "OK." Your student will be checked in and ready to go!