|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **附件：**  **湛江财贸学校学生返校前14天健康情况监测卡**  **（请务必实事求是、准确填写）** | | | | | | | | | | | | | | | | | | | | | |
| 年级： 班级： 学号： | | | | | | | | | | | | | | | | | | | | | |
| 姓名 | |  | | | 性别 | |  | | 出生年月 | |  | | | | | 籍贯 | | |  | | |
| 联系电话 | |  | | | 家庭地址 | | | |  | | | | | | | | | | | | |
| 返校前14天体温 | 日期 |  |  |  |  |  | |  |  |  | |  |  | |  | |  | |  | |  |
| 天数 | 1 | 2 | 3 | 4 | 5 | | 6 | 7 | 8 | | 9 | 10 | | 11 | | 12 | | 13 | | 14 |
| ℃ |  |  |  |  |  | |  |  |  | |  |  | |  | |  | |  | |  |
| 返校前14天身体健康状态 | |  | | | | | | | 家庭成员身体健康状态 | | | |  | | | | | | | | |
| 是否曾往返疫区、或境外？（具体时间） | |  | | | | | | | 是否曾接触疫区或境外人员？（具体时间） | | | |  | | | | | | | | |
| 既往疾病及过敏史 | |  |  |  |  |  | |  | 是否曾离湛或从外地来湛（具体时间） | | | |  |  | |  | |  | |  | |
| 其他说明 | |  | | | | | | | | | | | | | | | | | | | |
| 本人签名： 家长签名： 日期： | | | | | | | | | | | | | | | | | | | | | |

备注：

1. 自行下载打印，记录返校前14天身体健康状况。
2. 务必如实、准备填写健康信息；如有发热情况，在（其他说明处）写明病因 。
3. 返校当天，把健康监测卡交给班主任，方可上课。