Paper-Based Self-Assessment and Location Log (cuScreen)

This paper-based self-assessment and location log can only be used in the event you do not own a mobile device, tablet or laptop. You must keep this log on you at all times while on the Carleton University campus. You may be asked at any time by university staff or cuScreen Ambassadors to show this log to confirm completion of your screening self-assessment.

You must submit this log via one of the cuScreen drop-boxes located in the lobby of Robertson Hall or at the Welcome Centre in Alumni Hall, or to a cuScreen Ambassador at the end of each day.

Q1. Are you currently experiencing one or more of the symptoms below that are new or worsening? Symptoms should not be chronic or related to other known causes or conditions.

Q2. Has a doctor, health care provider, or public health unit told you that you should currently be isolating (staying at home)?

Q3. In the last 10 days, have you tested positive on a rapid antigen test or a home-based self-testing kit?

Q4. In the last 10 days, have you been identified as a “close contact” someone who currently has COVID-19?

Q5. In the last 10 days, have you received a COVID Alert exposure notification on your cell phone?

Q6. In the last 14 days, have you travelled outside of Canada AND been advised to quarantine (as per the federal quarantine requirements)?

Q7. In the last 14 days, has someone in your household (someone you live with) travelled outside of Canada AND been advised to quarantine (as per the federal quarantine requirements) in the last 14 days?

Q8. In the last 10 days, has someone in your household (someone you live with) been identified as a "close contact" of someone who currently has COVID-19 AND advised by a doctor, healthcare provider or public health unit to self-isolate?

Q9. Is anyone you live with currently experiencing any new COVID-19 symptoms and/or waiting for test results after experiencing symptoms?

If you have answered no to all of the questions above, check the green status on the reverse. You can continue to come to campus as planned; remember to wear a mask and abide by all posted signage and applicable public health requirements.

If you are able to gain access to a computer or mobile device, we strongly encourage you to use cuScreen to complete your self-assessment.

carleton.ca/covid19/cuscreen
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The symptoms listed here are the symptoms most commonly associated with COVID-19. If you have these symptoms, you should isolate and seek testing. Please note that rapid antigen testing is not to be used for those with symptoms of COVID-19 or for contacts of known COVID-19 cases. For additional assistance, contact Telehealth Ontario at 1-866-797-0000, or your local health care practitioner. This assessment is not a replacement for medical advice. If you are experiencing severe symptoms or have other concerns, please seek medical attention.

- **Fever and/or chills**
  Temperature of 37.8 degrees Celsius/100 degrees Fahrenheit or higher

- **Cough or barking cough (croup)**
  Not related to asthma, post-infectious reactive airways, COPD, or other known causes or conditions you already have

- **Shortness of breath**
  Not related to asthma or other known causes or conditions you already have

- **Decrease or loss of smell or taste**
  Not related to seasonal allergies, neurological disorders, or other known causes or conditions you already have

- **Fatigue, lethargy, malaise and/or muscle aches/joint pain (for adults ≥ 18 years or older)**
  Unusual tiredness, lack of energy (not related to depression, insomnia, thyroid dysfunction, or other known causes or conditions you already have)
  If you received a COVID-19 vaccination in the last 48 hours and are experiencing mild fatigue, muscle aches, and/or joint pain that only began after vaccination, select “No.

- **Nausea, vomiting and/or diarrhea (for children < 18 years)**
  Not related to irritable bowel syndrome, anxiety, menstrual cramps, or other known causes or conditions you already have

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**Carleton ID:** ___________________  **Name:** ___________________  **Date:** ______________

**Phone Number:** __________________________

**Location Information** *(to be used for contact tracing only)*

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<th>Time Out</th>
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**Screening Results:**

___ I have answered no to all screening questions on the reverse. **Green Status**

___ I have answered yes to at least one screening question on the reverse. **Red Status**

You must stay home and report your symptoms in cuScreen.

**Vaccination Status:**

If using this form, you must present proof of vaccination and photo ID. If you are not fully vaccinated (1 dose) or have an approved exemption, you must also present a negative rapid test result no older than 72 hours.

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Last Updated: December 15, 2021
Privacy Statement: carleton.ca/covid19/cuscreen/privacy