学校感染症(インフルエンザ・COVID-19) **Health Check sheet** (For Students)

*School infectious Disease Prevention Policy(Regulathions on the School Health and Safety Act,Article 19)will not be allowed to come to school during the suspension period of coming to school "based on the authority of relevant Japanese law

① If you feel sick, visit a hospital, or suspect that you may be infected, contact the Student Affairs Division.

Please access the "School Infectious Disease Report Form" on the University of Shizuoka website and fill in the required information.

Student Affairs Department mail: gakus@u-shizuoka-ken.ac.jp tel: 054-264-5009 Report Form https://req.qubo.jp/u_shizuoka/form/iXJMMv18 \rightarrow



Fill out with a ballpoint pen

- ② When you recover from the infection, the following documents must be submitted to Health Support Center:
- Health check sheet
 Prescription or
 Medical expenses receipt

I live in (Private apartment, University Residence, Family home)

After health check \Rightarrow Submit to the student office \Rightarrow The student brings the absence letter to the teacher in charge of the class

You can not attend the University, until normal fever lasts for 3days without using antipyretics and symptoms disappearance.

Student ID

Name

Affiliated Laboratory

Student Club /Society

* Activities you did (Circle O all that apply)

						*Activities you did (Circle ○ all that apply)											y)							
	Date	Day of week	Temperature		Use of antipyre tics	* Put a circle ○in a box when the symptoms appear									Class, School activity, Club, Part-time job, Travel etc.									
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						Fever	Malaise	Runny nose	Breath shortne	Cough	Headache	Sore throat	diarrhea	dysgeusia	olfactory anomaly	Others	1	2	3	4	5	activitie	me job	activities etc.
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* Do health checks and describe body temperature until morning of the day you return to campus.

Clinic name	出席停止期間			
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drug/pill name()	確認印		
How many days()		医務室	学生室	
Other (explanation etc.)				
Vaccination no/ yes (date:				