



## Island County Public Health

Communicable Disease Program

### School Absenteeism Form (Report if >10% absent due to illness)

**When absenteeism due to unexpected illness is greater than 10% of the student population, please notify Craig Youderian via email at [c.youderian@islandcountywa.gov](mailto:c.youderian@islandcountywa.gov), phone at 360-678-8246, or fax 360-221-8480.**

#### SCHOOL INFORMATION:

School name: \_\_\_\_\_ City: \_\_\_\_\_

Contact name: \_\_\_\_\_ Phone: \_\_\_\_\_

#### ILLNESS ABSENTEEISM INFORMATION:

Please report the number of students absent (for at least half of the school day) due to unexpected illness. Also please remember to fill in the TOTAL NUMBER of students enrolled.

If a student was out due to a pre-scheduled medical/dental appointment, please do not include them in the number of students out due to illness.

Please note you only need to report **once per week** if you have multiple days in a row of >10% absenteeism.

Date of excessive absence: \_\_\_\_\_

Number of students ill	Total number of students enrolled

#### TYPE OF ILLNESS INFORMATION:

Please check all types of illness and symptoms that have been reported to your school.

Symptoms	✓
Fever ( $\geq 100.4^{\circ}\text{F}$ )	
Body aches	
Cough	
Nasal congestion	
Chest congestion	
Headache	
Sore throat	
Vomiting	
Other:	

Type of illness	✓	Number ill (if available)
COVID-19		
Influenza or Influenza-like illness		
Pneumonia		
Strep throat		
Mononucleosis		
Colds		
Chicken pox		
Stomach virus		
Unknown/Other:		