附件：

2022年湖南省高职（高专）单招考试永州师范高等专科学校考点招生院校来校教师自我健康状况监测记录表

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓名 |  | | | 出生年月 | | | | |  | | | | 性别 | |  | | 所在学校 | |  |
| 住址 |  | | | | | | | | | | | | | | | | | | |
| 14天前是否前往境外或国内疫情中高风险地区 | | | | | |  | | 前往  时间 | | | | |  | | 返回  时间 | |  | | |
| 14天前是否接触过确诊或  疑似病例 | | | | | |  | | 接触时间 | | | | |  | | 是否  隔离期满 | |  | | |
| 本人身份证号码 | | | | |  | | | | | | | | | | 联系电话 | |  | | |
| 是否为确诊或疑似病例 | | | | | |  | | | | | | | 健康码、行程码情况 | | | |  | | |
| 当前是否健康 | |  | | | | 体温是否正常 | | | | |  | | | | 其他  症状 | |  | | |
| 是否接种了  新冠疫苗 | |  | | | | 完成全程接种  疫苗时间 | | | | |  | | | 未接种疫苗的禁忌症说明 | | |  | | |
| 考前14天体温监测记录（逐日记录体温状况） | | | | | | | | | | | | | | | | | | | |
| |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | 日期 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | 体温 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   家庭其他成员健康状况 | | | | | | | | | | | | | | | | | | | |
| 姓名及关系 | | | 14天前是否前往疫情敏感地区 | | | | 14天前是否接触过确诊或疑似病例 | | | | | 是否为确诊或疑似病例 | | | | 健康码、行程码情况 | | 是否完成  新冠疫苗  接种 | |
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| 填报人签名 | | |  | | | | | | | 填报日期 | | | | | | |  | | |

注：1.疫情中高风险地区根据当日国家政务服务平台提供的信息为准；2.体温高于37.3摄氏度为不正常；

3.如实填写并对所填内容真实性负责，此表上交后由考点存档。