COVID-19 Response Plan for the safe and sustainable reopening of primary and special schools

Appendix 5 Contact Tracing Log

Name of School					School Conta	ontact		
Address of					For Queries			
School					only: Phone No			
					Email			
Name of Visitor						·	Was the visit pre-arra Principal? Yes □ No □	anged with the
Date of Visit	//		Time	Entry to school _	am □ pm □		Exit from School	am □ pm □
Visitor Status	Contractor	ctor □ Parent/Guardian □ Other □ Plea				e:		
Contact details of visitor	Company Name (if applicable)							
	Address							
	Contact No.				Email Address			
	Reason for Visit							
Who the visitor met (separate line required for each person the visitor met)								
Name of Person visited							Length of time spent with each person in the school	