

Action History Memo

Student No. : _____

Name : _____

Self-check memo for the prevention of further spread of COVID-19.
Utilize this memo to record your action history.

Date		Health Condition/ Symptoms	Body Temperature	Action history
		○ (Normal as usual) △ (Not very well) × (Feel sick)		Record your action with time, destination, and people with whom you have had close contact.
Example April 1	Wed	△ Headache (If your health condition is either △ or ×, write down the symptom.)	36.2	9:00-10:30 Attended class (Room 102, Bldg. XXX) 10:45-12:15 Worked on assignment (Library) 12:30-13:00 Had lunch with (name of person) (Univ. Cafeteria Sogno) 14:00-20:00 Part-time job (name of the place) 21:00 Came home
/	Mon			
/	Tue			
/	Wed			
/	Thu			
/	Fri			
/	Sat			
/	Sun			