



Tarrant County Public Health
Division of Epidemiology and Health Information

INFLUENZA SURVEILLANCE ENROLLMENT FORM

Please join Tarrant County Public Health (TCPH) in safeguarding our community through the influenza surveillance program. TCPH asks that your organization perform the following:

I. SCHOOLS

- 1) Weekly completion and submission of the **Influenza Surveillance Weekly Report Form** to TCPH. The Influenza Surveillance Weekly Reporting form for ISDs requests the following information:
 - Dates of Reporting Week (Monday through Friday)
 - School District Name
 - Were any schools closed due to excessive Influenza-Like Illnesses; **Yes or No?**
 - Enrollment for reporting week (the number of students enrolled in the district)
 - Daily absenteeism (Monday through Friday) and total weekly absenteeism.

Please provide the following information:

Facility Name: _____

Influenza Surveillance Point of Contact

Name: _____

Title: _____

Phone: _____

Fax: _____

E-mail: _____

Please complete this form and submit via fax to TCPH Epidemiology and Health Information at (817) 850-8921 or email to Flu@tarrantcounty.com.

Again, thank you for participating in this important public health initiative; your participation is greatly appreciated.