

## Statement of Agreement – 2020 – 2021

Please read the document below and sign the bottom of the form indicating that you have read and understand the referenced documents and the procedures listed below.

- 1. Parent(s)/guardian(s) have read and understand the following documents: A) 'Blessed Sacrament School Re-Opening Plans 2020', and B) the 'Diocese of Covington Return to School Requirements', both of which can be found on this page.
- 2. Parent(s)/guardian(s) have read and agree to the 'Acknowledgement of Responsibility to Perform Daily Personal Health Assessment' information, which can be found below.

## Acknowledgement of Responsibility to Perform Daily Personal Health Assessment

To help provide a safe environment for the students and staff at Blessed Sacrament School, every school family must share in the responsibility of minimizing the potential spread of the COVID-19 virus. Blessed Sacrament School has implemented numerous precautions and safeguards to help provide a safe on-campus learning environment for the students and staff. However, achieving this goal also depends on school families doing their part. This includes ensuring that students do not come to school, or attend any school-related activities, if a student is showing signs or symptoms of potentially having the COVID-19 virus.

Accordingly, it is required that each student, with the assistance of a parent or guardian, complete the following daily personal health assessment **each day** before the student leaves home for school or a school-related activity, as follows:

## **Daily Personal Health Assessment**

- a. Does the student have a temperature of 100.4 or greater, as measured by a reliable and accurate home thermometer?
- b. Does the student have any COVID-19 related symptoms, including persistent non-allergy related cough, shortness of breath, difficulty breathing, chills, muscle pain not attributable to recent activity, sore throat, new rash, GI symptoms (i.e., vomiting or diarrhea), or new loss of taste or smell?
- c. Has anyone in the student's household been diagnosed with, or showing symptoms of, COVID-19?
- d. Has the student been in recent close contact (i.e., past 48 hours) with anyone exhibiting symptoms of COVID-19 who has tested positive, not been tested, or is waiting for test results?

If the answer is "yes" to any of the foregoing questions, the student is **not permitted** to attend school or any school-related activity, and the student's parent or guardian must contact the school office immediately. Depending on the circumstances, the student may not be permitted to return to school until the student receives authorization from a healthcare provider that it is safe for the student to return.

The personal health assessment must also be completed by **any** parent, guardian, family member or other person prior to entering any school facility.

Upon arrival at school, as well as throughout the day, students will have their temperatures taken by school staff. If a student has a temperature of 100.4 or greater, or if the student is exhibiting any COVID-19 symptoms, the student's parent or guardian must urgently arrange for the student to leave school, as soon as possible.

The parent(s) or guardian(s) of each student must sign the second sheet of this document acknowledging that they have read, understood and agree to comply with the terms of this document. The first page of this document must be kept at home for daily review before the student leaves for school or any school-related activity.

I have received, read, understand and agree to comply with the terms of the **Acknowledgement of Responsibility to Perform Daily Personal Health Assessment**. If my child answers "yes" to any of the questions contained in the Daily Personal Health Assessment, I understand that my child cannot attend school or any school-related activity, and that I must call the school office immediately. My child's attendance at school or any school-related activity on any day serves as my acknowledgment that my child has completed the daily health assessment and that all answers were "no."

Parent/Guardian Name	
Signature	Date
Signature	Date
Parent/Guardian Name	
Signature	Date