

Below is the parent acknowledgment and agreement to self-screen your student for COVID-19. This goes into effect immediately. By sending your student to an SAISD facility you are subject to the terms below.

Parent Acknowledgement and Agreement to Self-Screen Child for COVID-19

I understand that it is the expectation of San Angelo Independent School District that I will not send my child to an SAISD facility if my child or anyone in the child's household has any of the COVID-19 symptoms listed below. If my child or a household member has any such symptoms, I will instead opt for my child to receive remote instruction through Schoology until all of the below criteria to return to school have been met.

SYMPTOMS

Check your child(ren) daily for the following symptoms that are not normal for him/her:

- Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
- Loss of taste or smell
- Cough
- Difficulty breathing
- Shortness of breath
- Fatigue
- Headache
- Chills
- Sore throat
- Congestion or runny nose
- Shaking or exaggerated shivering
- Significant muscle pain or ache
- Diarrhea
- Nausea or vomiting

CRITERIA TO RETURN TO CAMPUS

Students who have tested positive for COVID-19 can return to school when:

- They are fever-free for 24 hours without the use of Tylenol or other fever-reducing medication; **AND**
- Symptoms have improved (cough, difficulty breathing, etc.); **AND**
- 10 days have passed since symptoms began; **AND**
- they have been officially released by the health department.

If your child has any symptom that could be COVID-19 and you would like to send him/her back to campus before completing the steps above, your child's school Nurse will require you obtain:

(i) a Doctor's note allowing your child to return to campus or (ii) **an acute infection test with a negative result for COVID-19.**

I understand that I may also choose to have my child receive remote instruction through Schoology if my child has had direct contact with someone who is lab-confirmed with COVID-19, and I will not send my child to school following exposure until after 14 days and official release from the health department.

If you would like more information or have any questions, please reach out to the school Nurse at your child's campus. We are happy to help.

ACKNOWLEDGEMENT AND AGREEMENT

By sending my student to in-person instruction on campus, I am acknowledging and agreeing to all of the following:

- I have read and understand the expectations regarding COVID-19 and my child's ability to participate in instruction on campus.
- I understand it is my responsibility to screen my child and myself prior to sending my child to school.
- I understand my responsibility to report to the school if my child or a member of my child's household has any COVID-19 symptoms or if my child tests positive for COVID-19.
- I understand my responsibility to keep my child at home and participate in remote learning through Schoology if my child has any symptoms of COVID-19, is in direct contact with someone who tests positive for COVID-19 or if my child tests positive for COVID-19.
- I understand it is my responsibility to keep my child at home until he/she meets the criteria to return to learning on campus.

This information remains subject to change based on guidance from our local and state health authorities.