## Squamish Waldorf School COVID-19 Information and Parental Agreement

This form must be returned by parents in each household before their children are permitted to return to school.

## **Parent and Caregiver Responsibility**

It is the responsibility of parents and caregivers to assess their children **on a daily basis** before sending them to school. Additionally, parents must have a person available to pick up their child right away, should they become sick during school. Please read the following guidelines, then sign the agreement below. Further guidance is provided in SWS COVID-19 Policy and Protocols, available on our COVID-19 resource page.

## Guidelines for determining whether a child should remain at home:

- All students and staff who have symptoms of COVID-19, OR travelled outside Canada in the last 14 days, OR were identified as a close contact of a confirmed case or outbreak must stay home and self-isolate, including children of essential service workers who are ill.
- Those unsure of if they, or a student, should self-isolate should be directed to use the <u>BC COVID-</u> <u>19 Self-Assessment Tool.</u>
- Parents and caregivers must assess their child daily for symptoms of common cold, influenza, COVID-19, or other infectious respiratory disease before sending them to school.
- If children display symptoms, they are asked to remain home and not return to school until they have been assessed by a physician or nurse practitioner.
- Additionally, parents can contact 8-1-1, or the local public health unit to seek further input, or contact a family physician or nurse practitioner to be assessed for COVID-19 and other infectious respiratory diseases.
- If a student or staff member is assessed by their family physician or nurse practitioner and it is determined that they do NOT have COVID-19, they may return to school once symptoms resolve.

## **Parental Agreement**

Please indicated that you have read and understood the above guidelines by completing the form below.

□ I have read the above guidelines and agree to assess my child(ren) daily and not permit them to come to school if they are displaying any symptoms of common cold, influenza, COVID-19, or other infectious respiratory disease.

□ I will ensure that myself or an authorized person is available to pick up my child(ren) immediately should they become sick while at school.

Names of children enrolled at SWS:

Signature of parent

Date signed

Name of parent