

HWDSB

Return to School Attestation

To be completed once, before a student arrives at school.

Dear Parent/Guardian/Caregiver or student (if age 18 or older):

Prior to beginning school on September 8, 2020, parents/guardians/caregivers and students over age 18 must complete a one-time attestation indicating the following as it relates to daily screening for COVID-19 symptoms:

If you have any questions about statements below, please contact the student's school prior to completion.

Note: The term "student" is intended to be inclusive and refers to the child of the parent/guardian/caregiver or the student if they are age 18 or older.

Check each box to agree.

- I have read and understood the document *HWDSB COVID-19 Student Screening Checklist*.
- I understand that prior to the student attending school, I must complete a daily COVID-19 screen, either by reviewing the *HWDSB COVID-19 Student Screening Checklist* or the [Ontario online self-assessment](#).
- I will follow the instructions at the completion of the screening.
- I understand that if the student is feeling ill or if the student fails the checklist or self-assessment, they must remain home and I will contact the school to report the absence.
- I understand that if the student begins to feel ill during the day with COVID-19 symptoms, they will be isolated until they are picked up and I will be contacted to pick them up immediately. They will be supervised during this time.
- I understand that if I send the student to school with COVID-19 symptoms, I will be risking the health and safety of my child, other students and staff.
- I understand that if one student in my home tests positive for COVID-19, all students in my home will remain home for 14 days from the time of symptom onset or, if asymptomatic, since the test date (or longer if symptoms are not improving).
- I understand that I must complete the attestation for each student that attends a school in HWDSB.
- I understand that I must complete the DAILY COVID-19 screen for each student that attends an HWDSB school.

Acknowledged and attested this _____ day of _____, 2020

Student Name

Parent/Guardian/Caregiver/Student age 18+
Signature