

***This is a sample only, the school will provide you with the actual form.***

## **COVID-19 Parent/Guardian Acknowledgement and Disclosure Form**

We all must work together to make our school campus as safe as possible for students, teachers, and staff. While the Deer Valley Unified School District is taking measures to reduce the risk of spreading COVID-19, we need our families to do the same.

You and your child are expected to follow the COVID-19 Code of Conduct as described below. Please read and initial each statement.

1. \_\_\_\_\_ I will take my child's temperature every day prior to coming to school and conduct a daily screening of my child for COVID-like symptoms prior to my child arriving at school.

2. \_\_\_\_\_ I will keep my child home from school if my child has any of the following symptoms that are not related to an already diagnosed condition or illness: (This list may be updated by public health authorities in the future.)

Fever of 100.0 or higher  
Chills  
Cough  
Shortness of breath or difficulty breathing  
New loss of taste or smell  
Sore throat  
Fatigue  
Muscle or body aches  
Headache  
Congestion or runny nose  
Nausea or vomiting  
Diarrhea

3. \_\_\_\_\_ I have read the Maricopa County Department of Public Health guidance which can be found by visiting <https://www.maricopa.gov/DocumentCenter/View/58863/Home-Isolation-Guidance?bidId=>. This guidance states that a child may not come to school if he/she tests positive for COVID-19 until home isolation requirements have been

6. \_\_\_\_\_ I understand that this low threshold for keeping kids at home may mean that my child may be away from school more often than in the past, and I will plan for such contingencies.
7. \_\_\_\_\_ I understand that my child will be required to wear a face covering throughout the day according to the protocols established by the Deer Valley Unified School District.
8. \_\_\_\_\_ I understand that the school will require my child to wash their hands, use hand sanitizer, and socially distance according to the protocols established by the Deer Valley Unified School District.
9. \_\_\_\_\_ I understand that the Deer Valley Unified School District will follow the Maricopa County Public Health Department's protocols on the reporting of COVID-19 illness at the school.
10. \_\_\_\_\_ I will report to the District's COVID-19 reporting form which can be found at