

School Bus Transportation Parent/Guardian Attestation

Student's First Name: Student	is Last Name:
Parent/Guardian First Name:Parent	:/Guardian Last Name:
Parents/guardians are required to review the information answers to questions 1-3 are "yes," the student will not	
 Has your child had close contact (within six feet for at least 15 diagnosed with COVID-19, or has any health department or headvised you to quarantine? Yes > Your child should NOT be at school. Your child 	ealthcare provider been in contact with you and can return 14 days after the last time he or she had
close contact with someone with COVID- No > Your child CAN be at school if your child is not	
2. Does your child have ANY of the following symptoms?	
Chills Shortness of breath or difficulty breathing New cough New loss of taste or smell	If a student has any of these symptoms, the student should stay home, stay away from other people, and you should contact your healthcare provider.
3. Since they were last in school, has your child been diagnosed	with COVID-19?
	sed on a test, symptoms, or does not get a COVID-19 test but school and should stay home until meeting the criteria below.
Your child CAN return to school when a parent/guardian can answ	ver <u>YES</u> to <u>all</u> three questions below.
 Has it been at least 10 days since your child first had symptom Has it been at least three days since your child had a fever (wind yes No) 	ithout using fever-reducing medicine)?
3. Has it been at least three days since your child's symptoms had breath?Yes No	ive improved, including cough and shortness of
If your child has had a negative COVID-19 test, the child can return fever without the use of fever-reducing medicines and the child has	·
If your child has been diagnosed with COVID-19 but does not have a school until 10 days have passed since the date of their first positive not subsequently developed symptoms since the positive COVID-19	e COVID-19 diagnostic test, assuming the child has
If your child has been determined to have been in close contact wit should remain out of school for 14 days since the last known date o case, criteria above would apply. The child must complete the full 1	of contact unless the child tests positive. In which
I attest that I have read, understand, and agree with the information	above as a condition of using bus transportation.
Parent/Guardian Signature:	Date: