

## USD 284 Test to Stay and Learn/Play Opt-in Contract

\_\_\_\_\_ as been identified as a close contact of a positive COVID case. USD 284 has implemented the Test to Stay and Learn/Play program with its specific guidelines. The guidelines allow students to attend school when they have been identified as a close contact. **During participation in the Test to Stay and Learn/Play program:**

The PARENT or GUARDIAN will:

1. Be available to assist with the nasal swab rapid test if needed.
2. If needed, be available to take the student home if he/she tests positive. Students who are legal drivers may drive themselves with parent's permission.
3. Contact their local health provider and/or the Chase County Health Department immediately if student tests positive, understanding that testing by USD 284 does not replace treatment by a medical provider. The parent will seek medical advice, care, and treatment from the medical provider as needed.
4. Monitor that the student(s) will remain in quarantine when not at school or school activities the student is approved to participate in. The student should not be at any activities he/she is not participating in.
5. Monitor the student for symptoms daily. Symptomatic students should remain at home or will be sent home.
6. Understand that, with any medical test, there is potential for false positive or false negative results.
7. Wait with the student for the test results (available in approximately 15-20 minutes) before taking the student to school. Students who are legal drivers may drive themselves with parent's permission.

The STUDENT will:

1. Report to the baseball field concession stand first thing in the morning every day of their quarantine for testing.
2. Cooperate with the nasal swab rapid COVID test.
3. Wear a mask properly while at school or at activities that you're participating in during the designated quarantine period.
4. Maintain 6 feet distance from others while at school when possible.
5. Report if you become symptomatic
6. Wait for the test results (available in approximately 15-20 minutes) before going to the school building.

The SCHOOL will:

1. Notify all building staff on a need to know basis of the students participating in the program.
2. Ensure that the student is following program guidelines which were published to parents and made available on the USD 284 website under COVID Dashboard and Informational Documents.

I give permission for \_\_\_\_\_ to participate in daily rapid COVID testing (administered by USD 284 health personnel) at the school-designated location during his/her quarantine period. I authorize that the test results will be disclosed to the county, state and any other governmental entity as may be required by law.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Student DOB \_\_\_\_\_ (needed for reporting test results)

Contact phone number for test results \_\_\_\_\_