

Promise

Early Education Center

COVID Parent Agreement

Child and Family Health Screener

My child has tested positive for COVID 19?

YES

Has your child come into contact with anyone who has tested positive with COVID 19?

NO

YES

Does your Child have a fever?
(Body Temp. Above 100.4 Fahrenheit or chills)

NO

YES

Does your child have more than one of these symptoms?

- Cough
- Headache
- Shortness of breath or difficulty breathing
- Fatigue
- Sore throat
- Muscle or body aches
- New loss of taste or smell
- Nausea or vomiting
- Diarrhea
- Runny nose or Congestion (ONLY with other symptoms)

NO

YES

Your Child is Ready to Attend School Today!

Guidance

Immediately Notify your child's teacher, Stay home and quarantine, Health will reach out with quarantine guidance

Notify your child's teacher immediately, complete an at home test before arriving to school.

- Health will reach out to Families for Test to Stay option if considered a close contact

If your child has a fever of 100.4 or above, your child **MUST** stay home and be fever FREE for 24 hours without fever reducing medication in order to return to school.

If your child has a fever and symptoms such as

- Cough
- Headache
- Shortness of breath or difficulty breathing
- Fatigue
- Sore throat
- Muscle or body aches
- New loss of taste or smell
- Nausea or vomiting
- Diarrhea
- Runny nose or Congestion (ONLY with other symptoms)

They must take an at home COVID test or reach out to your PCP for further guidance before returning to school

If your child has 2 of these symptoms, they **MUST** remain home. To return to school your child must have improved symptoms and take an At Home COVID test OR reach out to your PCP for further guidance before returning to school



2022-2023

I _____ Agree to complete the Child and Family Health Screener daily with my child before arriving to school.

- I know I must pick up my child **within 15 minutes** if they become ill within the school day and cannot actively participate.
- I will follow the Child and Family Health Screener's guidance if my child is sick and notify my child's teacher as soon as possible.
- I have been informed that the current expectation by Head Start and Child Care Licensing is that all staff in childcare and children aged 2 and up are required to wear a face mask.
- I will arrive at my child's center at my scheduled time every day and understand that access to centers will be limited to a parent and child at drop off and pickup while maintaining 6 feet of distance from others while waiting in and outside of Promise Centers.
- I will update all emergency contact information if any has changed i.e. phone numbers, address and place of employment with staff. You will be asked daily for emergency phone contact information.
- I know that my child's temperature will be taken by a classroom teacher 15 minutes after arrival.
- I am aware that my child will be offered a Test to Stay Option if they are exposed to COVID 19 to remain at school.

Childs Name: _____ Classroom: _____

Parent/Guardian Signature: _____ Date _____

Staff Signature: _____ Date _____