

STUDENT ACCOUNTABILITY AND REQUIRED HEALTH PROTOCOLS



COVID-19 GUIDANCE | Last updated 10/12/20

PLEASE SIGN AND RETURN THIS FORM TO YOUR CHILD'S SCHOOL.

[Link to Signature Page](#)

By signing and returning this page, you acknowledge that you have received and understand the expectations outlined in the WCPSS "Student Accountability and Required Health Protocols"

This form will be kept at your child's school.

Parent or Guardian's Signature

Date

To enable us to properly record that you have returned this sheet, please carefully print the information below and ask your student to sign to acknowledge receipt and understanding of expectations outlined in the WCPSS "Student Accountability and Required Health Protocols"

Student's Name

Student's Grade

Student's Signature

Date