

NINE MILE FALLS SCHOOL DISTRICT ATTESTATION FORM

Student Name: _____

All Students must provide an attestation form to enter our buildings. If we learn you may have been exposed to COVID-19 during your visit, we will only share this information with public health officials. We will not use this information for any other purpose.

Yes (healthy) or No (I have symptoms)

I attest that myself, my son, or daughter do not have:

Fever (100.4) or chills Cough, Shortness of Breath or difficulty breathing Unusual fatigue -Headache
Muscle or Body aches Diarrhea, Recent Loss of taste or smell Sore Throat, Congestion or runny nose Nausea or Vomiting
(If you or your student have any of the above symptoms please do not enter our schools.)

Signature: _____

Date: _____

(Students who do not present this pass when entering the building will be unable to attend class until they've been screened by building staff. This may result in delayed arrival to class. If district screening processes result in isolation, parents will be asked to pick students up).

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