

Face Covering/Pandemic Safety Contract

I, _____, do agree to the following safety expectations and procedures with respect to the Covid19 pandemic. The wearing of a face covering protects me and others around me with regard to transmitting this virus and is a sign of respect for my peers and teachers/staff. I understand compliance with this contract will continue to afford me the right to attend school in person. I also understand that failure to comply with the outlined expectations below will immediately change my placement to remote learning.

1. I will appropriately wear a face covering upon entering my school campus or any school district facility. Appropriately, is defined as covering one's nose and mouth.
2. I understand that wearing a face covering on my school campus or any school district facility is a school and district expectation and requirement.
3. I understand if I do not comply with these guidelines, my academic placement will immediately be changed to remote learning for a period to be determined by my school Principal/Designee.
4. I will comply with all directives from school staff regarding requests to wear my face covering while on my school campus or any school district property.
5. I understand that my face covering needs to be school appropriate according to the MCSD approved Dress Code and Code of Student Conduct.
6. I will socially distance 6 feet or more from others as possible.

Please note, failure to sign and return this contract will not relieve a student or his/her parent(s) from the responsibility and terms of this contract.

Assistant Principal/ Designee Signature

Date

_____/_____
Signature of Student AND Parent/ Guardian

Date