



## Return to School/Work Certification for COVID-19

Students/SJPSB Employees with COVID-19 symptoms who were directed to care for themselves at home and did **NOT** test, may end self-isolation/quarantine when at least **72 hours** have passed *since recovery*, meaning:

- Fever free without the use of fever-reducing medications, **and**
- Improvement in symptoms (e.g., cough, shortness of breath), **and**
- At least **10 days** have passed *since symptoms first appeared*.

Persons sick or placed in isolation/quarantine with suspected COVID-19 or with COVID-19 like symptoms, who have been tested and have received a **negative** test for COVID-19, may return to school/work provided they feel well and have been *symptom free for 72 hours before returning to school/work*. If the person is virtual school from home, the person does not have to wait the 72 hours before resuming school duties.

Persons identified as a close contact (defined as within 6 feet for 15 minutes) of a confirmed positive COVID-19 individual and have been placed in isolation/quarantine, may return to school/work after the **14 day** isolation/quarantine period has been completed and who have **NOT** develop symptoms during this time.

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### Parent/Employee Certification

Student/Employee Name: \_\_\_\_\_

Test Date: \_\_\_\_\_ / \_\_\_\_\_ / 2020                      Not Tested

Test Result (Circle One):                      Positive                      Negative                      N/A

Date of Symptom onset: \_\_\_\_\_ / \_\_\_\_\_ / 2020                      N/A

Date of Recovery (No Symptoms): \_\_\_\_\_ / \_\_\_\_\_ / 2020                      N/A

Date of Return to School/Work: \_\_\_\_\_ / \_\_\_\_\_ / 2020

By signing this document, I agree to provide documentation of COVID-19 test results (if applicable) and verify that I have/my child has been symptom-free for the appropriate number of days and that the information reported above is correct. Therefore, I/my child can be released from isolation/quarantine and may resume school/work-related activities.

\_\_\_\_\_  
Parent/Employee Signature

\_\_\_\_\_  
Date