

## Return to School Plan 2021-2022 Parent Signature Page

By signing below, I/we acknowledge that I have read and understand the guidelines set forth in the 2021-2022 St. Thomas the Apostle School Return to School Plan, including:

- The policy regarding daily monitoring of child(ren) for signs of illness before sending them to school.
- The policy regarding mask wearing for all students and staff, regardless of vaccination status.
- The policy regarding remote instruction, including the policy stating that remote learning will ONLY be available if a full class needs to quarantine, or if the school needs to close due to Covid-19.
- The policy regarding travel restrictions and travel-related quarantines.

I/We agree to comply with all policies set forth in the 2021-2022 St. Thomas the Apostle School Return to School Plan. We understand that this is a fluid document and subject to change at any time as needed, as decided upon by the Pastor or Principal of St. Thomas the Apostle, the Diocese of Metuchen, or with guidance from the NJ Department of Health.

***\*This document must be signed by BOTH Parents/Guardians.***

**Student Name:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Student Name:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Student Name:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Student Name:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Parent 1 Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent 2 Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_