

School COVID-19 Testing Option "Test in School to Stay in School"

San Diego Unified School District continues to work with public health authorities, medical professionals, and scientific experts for a safe, responsible reopening in light of the COVID-19 pandemic. One of the best ways to prevent the spread of COVID-19, and the best way to ensure your child can continue learning in school and avoid an at-home quarantine, is to test for COVID-19 regularly. For this reason, our district is requiring parents to notify us of your decision regarding student COVID-19 testing by September 10, 2021. The district is offering free testing for students at school sites and we strongly recommend that you opt in to our student testing program. Please check YES to Question #1 if you wish to enroll your child in the District testing program.

oll your child in the District testing program.						
1.	want to enroll my child in the District's testing program, as described below:					

o No

2	Optional response -	My child has	received both	doses of the	COVID vaccine
۷.	Optional response.	iviy cilliu ilas	received both	uoses of the	COVID Vaccine

Yes

o No

Benefits of Testing

It's convenient - When your child needs a test to remain in school or to return to school after an illness, testing at school is safe, secure and easier than finding a lab elsewhere.

Students who are tested at school when a classmate is infectious may be eligible for "modified quarantine" which means they can attend their regular classroom versus doing a traditional "at-home" quarantine.

Free Onsite Testing can help to prevent the spread of COVID-19 at school and home.

Athletics - Vaccination or routine testing is the only way to ensure students' right to participate in athletics.

Opting in to the district's COVID Testing ensures that your child participates in all testing listed

Symptomatic Testing - for students who develop symptoms at school, regardless of vaccination status, they will be tested before they go home so that they can return to school as quickly as possible.

Contact Tracing Testing - for students who have been in close contact with someone who has tested positive for COVID-19 while at school. For the purposes of contact tracing, testing would be required only for students who are not fully vaccinated, as vaccinated students do not have to guarantine.

- Qualifying for a modified 10 day quarantine, a student can remain in their regular classroom at school for learning, if:
 - Student remains without symptoms
 - O All students affected were wearing masks during the period of close contact
 - The contact occurred while on site
 - Student is tested twice weekly and student test results are negative
- If a student is not tested, they must remain at home for the duration of the quarantine.

Routine Testing - Weekly testing for students without symptoms. The purpose of routine COVID-19 testing is to detect students who are positive before they have a chance to spread the infection. This is primarily for students who are not vaccinated.

Additional Information About Our COVID-19 Tests				
Testing specimens are collected by an "anterior nasal swab" (a cotton swab that rotates around the nostril). It is painless and safe.	Although the District is offering these tests, availability is not guaranteed. Tests may be limited, depending on availability of testers, testing supplies, etc.			
The District contracts with various laboratories and trained personnel to collect the sample and perform the test.	If enrolling a child in the testing program, the parent must also sign the testing consent forms for laboratory and laboratory personnel.			
The nasal sample may be submitted to a "PCR", Rapid Antigen test or other test. Some tests are repeated for verification.	Whether you answer "Yes" or "No" to Question #1 above, returning this form, signed, is required for each student.			
Information about the test results remains confidential.	A parent can change their response on this form at any time.			
Name of Student:	Date of Birth:			

Student ID number: _____ School Site: _____

Name of Parent/Guardian: _____

Signature of Parent/Guardian: ______Date: _____