



## SCHOOL-BASED COVID-19 TESTING CONSENT FORM

The Centers for Disease Control and Prevention (CDC) recommends offering coronavirus (COVID-19) testing in schools. COVID-19 testing helps schools identify cases of COVID-19 quickly and reduce the risk of COVID-19 infections at school. **For the 2021-22 school year, your student’s school is participating in a citywide COVID-19 school-based testing program available to DC public and public charter schools.**

***To opt in for your student (or you, if you are a student 18 years of age or older) to participate in school-based COVID-19 testing, you must fill out and return this consent form to your school.***

Further information on the testing program is available beginning on page 4.

STUDENT LAST NAME	STUDENT FIRST NAME	DATE OF BIRTH

By signing below, I attest that:

- I have signed this form freely and voluntarily, and I am legally authorized to make decisions for the student named above (or for myself, if I am a student 18 years of age or older).
- I consent for my student (or for myself, if I am a student 18 years of age or older) to be tested for COVID-19 infection:

PLEASE CHECK ALL THAT APPLY:

- Check here to consent for routine asymptomatic COVID-19 testing
- Check here to consent for COVID-19 testing if your student is identified as a close contact of an individual with COVID-19 in the school setting
- Check here to consent for symptomatic COVID-19 testing
- My consent is valid for the 2021-22 school year unless I notify the designated contact person from my student’s school in writing that I revoke my consent.
- I have read and understand the information provided in the Overview of School-Based COVID-19 Testing Program handout.
- I understand that my student’s test results, and other information may be disclosed as permitted by law.
- I understand that if I am a student age 18 or older, I may legally consent for my own health care, and references to “my student” refers to me. I understand that I may sign this form on my own behalf.
- I understand and agree that the District, the school, its employees, and agents shall be immune from civil liability for acts or omissions relating to the District’s citywide COVID-19 testing program, except for criminal acts, intentional wrongdoing, gross negligence, or willful misconduct.
- I understand that the District, the school, its employees and agents may not be held liable for COVID-19 infection of the identified student resulting from on campus attendance.

PARENT/GUARDIAN CONSENT SIGNATURE (IF STUDENT IS UNDER 18 YEARS OF AGE)	DATE (MM/DD/YYYY)
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SIGNATURE OF STUDENT (IF 18 YEARS OF AGE OR OLDER)	DATE (MM/DD/YYYY)
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**Contact Information | Completed by parent/guardian (or student, if 18 years of age or older)**

STUDENT LAST NAME:

STUDENT FIRST NAME:

DATE OF BIRTH:

SCHOOL NAME:

WARD:

HOME ADDRESS:

APT:

CITY:

STATE:

ZIP:

PARENT/GUARDIAN NAME:

PHONE:

EMAIL:

EMERGENCY CONTACT NAME:

EMERGENCY CONTACT PHONE:

STUDENT LAST NAME

STUDENT FIRST NAME

DATE OF BIRTH

**Consent Review by Observer:**

**Testing Observer:** review consent form and validate student identification. Sign where indicated as acknowledgement of consent review.

**School Personnel:** provide copy of signed consent to Testing Observer for each test conducted.

**Protection of Information:** This form will be used only for the purposes of providing and confirming consent to COVID-19 testing. The information will be safeguarded at all times in accordance with District of Columbia policy. This information will not be shared or used for any other purpose.

**Administrative Use Only:** My signature indicates I have reviewed this consent form. I attest that the student being tested is the student named in the consent form and that the form is signed by a parent/guardian (or the adult student, age 18 years or older).

OBSERVER NAME:

SIGNATURE:

DATE:



## OVERVIEW OF SCHOOL-BASED COVID-19 TESTING PROGRAM

Published: Aug. 13, 2021

The Centers for Disease Control and Prevention (CDC) recommends offering coronavirus (COVID-19) testing in schools. COVID-19 testing helps schools identify cases of COVID-19 quickly and reduce the risk of COVID-19 infections at school. **For the 2021-22 school year, your student's school is participating in a citywide COVID-19 school-based testing program available to DC public and public charter schools.**

This program uses a saliva-based PCR test, which you can learn more about here: [www.shieldt3.com/k12/](http://www.shieldt3.com/k12/). Test results will be shared securely with the student's parent/guardian (or the adult student directly), the appropriate school official(s), and DC Health.

DC public and public charter schools participating in the citywide COVID-19 school-based testing program are using this form to document consent to test your student (or you, if you are a student age 18 or older) for COVID-19 and to share data with relevant authorities. **All testing is free.**

The school-based testing program will provide both symptomatic and asymptomatic testing. Asymptomatic testing is testing for COVID-19 even if a student does not have symptoms of COVID-19, including routine "screening" testing: For the start of the school year 2021-22, a random sample of students will be selected weekly for testing. Asymptomatic testing also includes the testing of close contacts of a positive case of COVID-19. It is an effective method for slowing the spread of the disease and may assist in identifying potential outbreaks early. This allows you to provide care for the student sooner if they test positive for COVID-19; benefits students, parents, and the community; and supports continued in-person instruction. Symptomatic testing is done if a student develops symptoms of COVID-19 while at school.

**Who should test?** Routine asymptomatic screening testing is currently recommended by DC Health for unvaccinated individuals in a school community. At this time, DC Health does not recommend that fully vaccinated individuals participate in routine asymptomatic testing. Testing of close contacts of a positive case of COVID-19 and those with symptoms of COVID-19 is currently recommended by DC Health for all individuals, regardless of whether they are vaccinated or unvaccinated.

**How do I opt in?** You must fill out and return this consent form for your student (or you, if you are a student 18 years of age or older) to be tested. It will be presented to the testing team each time your student is tested. This consent form is valid for **the 2021-22 school year.**

**How do I opt out?** You may revoke your consent at any time by sending a written letter or email to your student's school stating that you do not wish your student (or you, if you are a student 18 years of age or older) to receive COVID-19 testing.

**What is the test?** The test is a non-invasive PCR test. A saliva sample is collected in a small test tube. A sample of 1-1.5 milliliters of saliva is collected.

### If you consent:

- Routine asymptomatic testing: The student may be selected as part of a random sample of individuals weekly to receive a test for the COVID-19 virus.
- Close contact testing: If the student is identified as a close contact of an individual who has COVID-19 in the school setting, they would be eligible for COVID-19 testing after the exposure.
- Symptomatic testing: The student will be eligible to complete a COVID-19 test if they develop symptoms of COVID-19 at school.

### How and when will I find out about the results of the test?

Saliva test results will be available through a patient portal that is directly available to parents/guardians, or the adult student. Results are typically available in 6-12 hours. Parents/guardians, or the adult student, will also be contacted by the school if a test is positive. DC Health will follow up with parents/guardians, or the adult student, as part of their routine procedures for positive COVID-19 tests. More information about the patient portal will be provided separately.

CONTINUED ON THE OTHER SIDE

### **What should I do when I receive my student's test results?**

If the student's test results are *negative*, it means that the virus was not detected in the student's specimen at this time. The student should continue maintaining the masking, hygiene and social distancing practices recommended by DC Health. If the student had a negative test result but is symptomatic or a close contact of an individual who tested positive for COVID-19, they should follow all guidance from DC Health and your school regarding when your student can return to school. If the student develops symptoms of COVID-19, you should call the student's healthcare provider, regardless of the test results.

If the student's test results are *positive*, it means the student *has* the virus and could spread it. Please contact the student's healthcare provider immediately. The student should stay at home and follow the health and school guidelines from DC Health and from your school. If the student is on-campus when the test result is received, they will be taken to an isolation area until they can be picked up from school.

### **Data and Reporting**

Data from this form and the results of tests will be collected as part of the COVID-19 reporting requirements and may be shared with relevant school and health authorities. The student's identity will not be released to others from the school community if they test positive for COVID-19.