



5130 Riverside Drive • Chino, CA 91710 • 909.628.1201 • www.chino.k12.ca.us  
Student Achievement • Safe Schools • Positive School Climate • Humility • Civility • Service

BOARD OF EDUCATION: Donald L. Bridge • Andrew Cruz • Jonathan E. Monroe • James Na • Sonja Shaw • SUPERINTENDENT: Norm Enfield, Ed.D.

## Positive COVID-19 Student Attestation Form To Return to School

Student Name: \_\_\_\_\_ School: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade: \_\_\_\_\_

Date of 5<sup>th</sup> day of Isolation: \_\_\_\_/\_\_\_\_/\_\_\_\_

*Isolation starts on the first day of symptom(s) or the positive test collection date, whichever occurs first.*

**By checking this box,** I attest that my child has been fever free without fever reducing medication for 24 hours.

**By checking this box,** I attest that any COVID-19 like symptom(s) have improved. *Symptoms include headache, runny nose, congestion, nausea, vomiting, diarrhea, muscle/body aches, fatigue, persistent/uncontrolled cough, difficulty breathing.*

\_\_\_\_\_  
Parent/Guardian Name & Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

***Please return this completed Positive COVID-19 Student Attestation Form to the school/attendance office upon return to school.***