

7 DAY QUARANTINE FORM

RUMSON SCHOOL DISTRICT

INSTRUCTIONS:

Parents, please complete the "PARENT SECTION" on a separate form for each of your children that you are requesting a quarantine reduction for 7 days in the Rumson Schools. Once completed, email with required attachments (see below in red) to:

School	Staff
Deane-Porter	Ms. Feeney, Ms. Zajac
Forrestdale	Mrs. Gibbons, Mrs. Montanez

PARENT SECTION:

STUDENT NAME:

STUDENT GRADE:

TRAVEL DATES: (if applicable)

RETURN TO NJ DATE: (if applicable)

LOCATION OF TRAVEL: (if applicable)

PCR TEST DATE:

PCR RESULTS (please attach a copy and make sure the test indicates that it is a PCR somewhere on the results and that the test was issued on Day 5 or later from your return to NJ date):

SCHOOL SECTION:

DATE RECEIVED:

DATE CLEARED TO RETURN TO SCHOOL: