**COVID-19 Contact Notification: Sample Notification Letter to Parents and Guardians of Students Determined to Be Close Contacts**

[Date]

Dear Parent or Guardian:

[Insert School Name] considers the health and well-being of our students and staff a priority. We have been alerted that an individual diagnosed with or suspected to have COVID-19 was in close proximity to your child on [mm/dd]. We are following Centers for Disease Control and Prevention (CDC) recommendations to help ensure that the person diagnosed with or suspected to have COVID-19 follows instructions for isolation and remains away from others until they can safely return to the school setting. We will also continue to clean and disinfect all areas of the school.

In collaboration with school and public health officials, we have determined that **your child is considered a**[**close contact**](https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing/contact-tracing-plan/appendix.html#contact) of the person diagnosed with or suspected to have COVID-19. The information you provide during contact tracing activities will be kept confidential in accordance with applicable federal, state, and local privacy laws and regulations.

If your child [SELECT OPTION PER SCHOOL POLICY: Is not up to date on their COVID-19 vaccines, including all eligible boosters / has not received their primary vaccine series], they should quarantine at home for at least 5 days after their last close contact with a person who has COVID-19 (the date of last close contact is considered day 0).

Please make note of the following important dates:

* The date of your child’s last known close contact with the person diagnosed with or suspected of having COVID-19 was [Insert date of exposure. If exposed on more than one day, list all dates of known exposure.].
* We recommend that your child be tested at least 5 days after the date of last known close contact with someone with COVID-19. This means your child should be tested on or after [insert date for day 5, using the date of the last exposure as day 0].
	+ If they test negative, they may return to school on [Insert date for day 6, using the date of the last exposure as day 0].
	+ If they test positive, they should isolate for at least 5 days from the date their symptoms began or from the date the positive viral test was collected if they do not have symptoms. They should follow our school’s isolation guidelines for returning to school.
* Everyone who is a close contact should correctly and consistently wear a well-fitting mask around others for 10 days from the date of their last close contact with someone with COVID-19.
* You should watch your child for symptoms until 10 days after their last close contact with someone with COVID-19, or until [insert date for day 10, using the date of the last exposure as day 0]. If symptoms develop, your child should isolate immediately and get tested, and you should notify the school right away. When you notify us, we can take additional steps to keep our school community safe. We may need to identify, in accordance with applicable laws, regulations, and policies relating to privacy and confidentiality, potential close contacts your student has had with others in order to prevent any additional spread of the virus.
* CDC continues to recommend indoor masking in K-12 schools for all people ages 2 years and older, including students, teachers, staff, and visitors, regardless of vaccination status.

**If your child has tested positive for COVID-19 in the last 90 days** and you are willing to provide proof of the previous positive viral test to the school, please contact [insert name of appropriate school contact] at [insert email and phone number]. People who have tested positive in the last 90 days and subsequently recovered and remain without COVID-19 symptoms do not need to quarantine or get tested after close contact. They should correctly and consistently wear a [well-fitting mask](https://www.cdc.gov/coronavirus/2019-ncov/your-health/effective-masks.html) around others and watch for [COVID-19 symptoms](https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html) for 10 days from the date of their last close contact with someone with COVID-19.

* We encourage you to visit [insert hyperlink to local public health department or other appropriate links] for additional information for ways to keep your family and our school community safe. In addition, CDC’s website also provides information about COVID-19, including an [overview of quarantine](https://www.cdc.gov/coronavirus/2019-ncov/your-health/quarantine-isolation.html). We will be happy to welcome your child back to in-person learning on the date specified above, or if you can provide proof of vaccination or positive test result within the past 90 days. In the meantime, [insert name of teacher or school administrator] will reach out to you with additional information on how your child can continue learning and receiving instruction during this time away from in-person school.

We will continue to provide you with regular updates as needed and will continue to provide prompt notification of any COVID-19 or other health-related concerns. We encourage you to contact us with questions and concerns. Please call us at [NUMBER], email us at [EMAIL], or visit our website [INSERT DETAILS HERE] for updates.

Please be assured that we are committed to facilitating an optimal learning experience and ensuring the safety of our students and staff.

Sincerely,

[NAME, TITLE, and CONTACT INFORMATION]