## LOS ALAMITOS UNIFIED SCHOOL DISTRICT

ACADEMICS \* ATHLETICS \* ACTIVITIES \* ARTS

10293 Bloomfield Street • Los Alamitos, CA 90720-2200 (562) 799-4700 • FAX (562) 799-4730

Andrew Pulver, Ed.D. Superintendent

## 5<sup>th</sup> Grade Parent(s)/Guardian(s):

Your student is participating 5<sup>th</sup> Grade Outdoor Science School (OSS) at Pali Institute, which is considered an overnight field trip. When you consent to your student participating in an overnight field trip you are consenting to the following while on the school sponsored field trip:

- Providing a negative Covid-19 test within 72 hours of trip departure.
- If the student begins to exhibit symptoms of Covid-19 the parent/guardian will have two options:
  - 1. Consult with Pali Institute to have a rapid Covid-19 test administered to their student (and/or)
  - 2. Immediately travel to Pali Institute to pick up their student and quarantine at home per CDC guidelines

5<sup>th</sup> grade families have the choice of using a district issued at-home saliva Covid-19 test, or submitting a negative Covid-19 test result within 72 hours of departure. For families choosing to use the district issued Covid-19 test, it is important you follow the timeline listed below for the school your student attends\*. Families choosing to not use a district issued test will need to provide test results the day before departure.

\*If a student does not return the saliva test as indicated below, the parent/guardian will be responsible for providing a negative Covid-19 test the day before the student leaves for OSS.

| LAE, Lee & Weaver                  |                                  |                                  |  |
|------------------------------------|----------------------------------|----------------------------------|--|
| Date Test Will Be Sent Home With   | Date Test Must Be Returned To    | Date Test Results Due For        |  |
| Students                           | School With The Student          | Non-School Testing               |  |
| Thursday, January 20 <sup>th</sup> | Friday, January 21 <sup>st</sup> | Monday, January 24 <sup>th</sup> |  |

| Hopkinson, McGaugh & Rossmoor      |                                  |                                  |  |
|------------------------------------|----------------------------------|----------------------------------|--|
| Date Test Will Be Sent Home With   | Date Test Must Be Returned To    | Date Test Results Due For        |  |
| Students                           | School With The Student          | Non-School Testing               |  |
| Thursday, January 27 <sup>th</sup> | Friday, January 28 <sup>th</sup> | Monday, January 31 <sup>st</sup> |  |

| symptoms (cough, shortness of breath, difficulty breath of taste or smell). I understand my student's tempe | y student to participate in the field trip if they have any eathing, fever, chills, muscle pain, sore throat, or new loss rature will be taken at the departure of the trip and that if she will not be able to depart on the trip, but may join the |
|---|--|
| Student Name (Printed)  | School   |
| Parent/Guardian Name (Printed)  | Parent/Guardian Cell Phone   |
| Parent/Guardian Signature   | Date   |