

March 12, 2020

Dear Parents/Guardians,

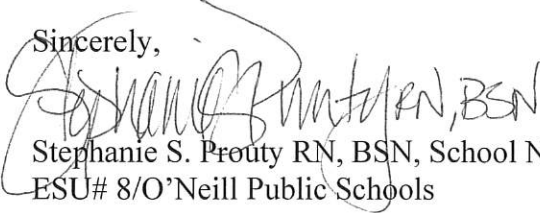
You are receiving this form due to the recent situation related to COVID-19 (Coronavirus). O'Neill Public Schools is staying in close contact with our local health department, North Central District Health Department (NCDCD), in regard to monitoring the virus. We are doing everything to the best of our abilities to ensure all precautionary measures are in place. Should the need arise for school closure, plans are being discussed so as not to disrupt the education of our students. At the time of this form release, there have been no confirmed cases in the Holt County area, so continuing to practice good hygiene (frequent handwashing, the use of hand sanitizer, deciding if traveling somewhere is worth risk, staying home when ill, etc.) is critical to maintain your health/safety along with those you come in contact with.

**As with other viruses/illnesses, people with compromised immune systems are encouraged to remain out of the public/stay home to protect their health. Should you feel your student has a health condition/compromised immune system AND/OR someone they reside with does, please know it's at your discretion to keep your student home, without penalty. We do not want to place anyone at risk. Your student will be responsible for communicating with their teacher(s) to stay current on homework.**

Please fill out the bottom of this form, detach it, and return it to the office by noon of the first day your child will be absent. If you have any questions, please feel free to call school nurse, Steph Prouty, at O'Neill Elementary #402-336-1400 or at O'Neill High School #402-336-1544 or via email communication at [stephprouty@oneillschools.org](mailto:stephprouty@oneillschools.org).

Thank you for your cooperation.

Sincerely,

  
Stephanie S. Prouty RN, BSN, School Nurse  
ESU# 8/O'Neill Public Schools



Amy Shane  
Superintendent, O'Neill Public Schools

By signing this form, I agree to allow my student, \_\_\_\_\_,  
to remain home due to a health concern related to the COVID-19 outbreak.

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(Parent/Guardian Signature)

(Date)

◆Parent/Guardian Name & Phone # \_\_\_\_\_

**IMPORTANT – PLEASE SIGN & RETURN AS NEEDED!!!!**