[Insert Today’s Date]

Dear Parent/Guardian:

I am sharing the following information with you on behalf of [insert school/facility name] and the Vermont Department of Health.

On [insert date/week], we learned about [insert number of cases] case(s) of Coronavirus Disease 2019 (COVID-19) at [insert school/facility name].

**Your child may continue to attend school.**

It is recommended that your child tests for COVID-19. Take home tests are available at[insert school/facility name]. Your child may pick these tests up at school.

If your child is fully vaccinated (2 shots of the COVID-19 vaccine):

* They will [have received/have been offered/have had the opportunity to pick up, etc.] 2 take home tests at school.
* If they test positive, keep your child home and follow the steps in [What to Do if You Test Positive for COVID-19](https://www.healthvermont.gov/covid-19/symptoms-sickness/what-do-if-you-test-positive-covid-19)
* Wear a mask around others for ten days after learning of their exposure

If your child is unvaccinated:

* They will [have received/have been offered/have had the opportunity to pick up, etc.] 5 take home tests at school.
* If they test positive, keep your child home and follow the steps in [What to Do if You Test Positive for COVID-19](https://www.healthvermont.gov/covid-19/symptoms-sickness/what-do-if-you-test-positive-covid-19)
* Wear a mask around others for ten days after learning of their possible exposure

Students with a possible exposure to a person with COVID-19 in school do not need to otherwise quarantine during their testing periods. Individuals who are close contacts to a case outside of school are recommended to quarantine according to Vermont Department of Health guidance but may attend school according to the above protocol.

Instructions on how to use the antigen tests can be found on the Health Department [testing website](https://www.healthvermont.gov/covid-19/testing). If your child’s test comes back as positive, please report this on the Vermont Department of Health [COVID-19 Self-Test Reporting Form.](https://survey.alchemer.com/s3/6507748/Vermont-COVID-19-Self-Test-Result-Reporting-Form)

Monitor your child for [symptoms of COVID-19](https://www.healthvermont.gov/covid-19/symptoms-sickness/symptoms), regardless of vaccination status. If your child has any symptoms of COVID-19, keep them home from school.

Due to medical privacy laws, we are not able to release the names of the individuals with COVID-19. We will continue to communicate changes and updates with you.

Please call[insert school/facility name] with any questions or concerns about this situation. Please call the Vermont Department of Health at 802-863-7240 (option 8) if you have questions about COVID-19. More information is available at the Health Department website:  [healthvermont.gov/COVID-19](http://www.healthvermont.gov/COVID-19).

Many thanks,

[Your name and contact info]