

Student Health Safety Agreement



The health and well-being of our students, instructors and staff is a top priority. With the current and uncertain future of the COVID-19 Pandemic outbreak, it is important that we follow very specific guidelines until the pandemic ends.

This document provides guidelines for keeping students, instructors, and college staff safe during the current COVID-19 pandemic **for all in-person classes**. As a condition for your return to class, you will be expected to practice and follow these guidelines consistently for the safety of not only yourself, but for others you will encounter at the college.

For my safety, the **College will do the following:**

- Maintain a commitment to keeping educational interruptions to a minimum and helping students stay on track to complete their programs of study,
- Initiate steps to reduce the risk of transmission of COVID-19, including thorough cleaning and disinfecting of classroom/lab areas at the conclusion of classes.
- Provide regular cleaning/disinfecting of common areas such as water fountains and restrooms,
- Quickly respond to student concerns and/or questions as they may arise, and
- Adapt, adjust, or change procedures or policies to adhere to CDC, state, or federal policy/guidelines.

Student Expectations:

As a student, I agree to the following conditions to return to class:

1. **I will not come to class sick or stay if I feel sick**, regardless of symptoms. I will contact my instructor so that he/she is aware and can make instructional accommodations if necessary. I will stay in touch regularly with my instructor until I return to class. If he/she has not provided me with contact information, I will ask or contact the Vice President of Academic and Student Affairs office at mmickles@centralvirginia.edu or (434) 832-7656 or (434) 832-7642.
2. **I will not come to class if I have been exposed to someone with COVID 19** or traveled to an area with a high incidence COVID 19. I will quarantine per CDC guidelines. I will not come back to class until I have quarantined for a minimum of 14 days. I will contact my instructor so that he/she is aware and may make instructional accommodations if appropriate, until I return to class.
3. **If after attending a class, I find out that I was exposed to someone with COVID 19 outside of class, I will contact my instructor immediately** and quarantine per CDC guidelines. I will not come back to class until I have quarantined for at least 14 days. My instructor may make instructional accommodations if appropriate. I will stay in touch with my instructor until I return to class.
4. **If I am diagnosed with COVID 19, I will not come to class. If I recently attended class, I will advise my instructor immediately of my diagnosis.** I will stay in touch with my instructor as I am able. I will not return to class until (1) a doctor/health professional verifies I have fully recovered OR I am 14-days post-diagnosis and symptom-free and (2) contact the Vice President for Academic and Student Affairs Office and submit documentation prior to returning to mmickles@centralvirginia.edu.
5. **I will practice Social/Physical Distancing and will not congregate** before, during, and after class, as well as during breaks. I will not loiter or socialize on campus and will leave the campus when not engaged in active course-related activity.
6. **I will wear a protective face covering (mask) to all in-person classes.** This will be required for class admission until such time as I am directed to discontinue. Other Personal Protective Equipment (PPE) may be required by the college or by my instructor. Failure to wear a face covering and required PPE while on campus may result in being asked to leave as well as possible dismissal from class.
7. **I will be prepared if this in-person class is moved online.** In the event of a new outbreak or change in state guidelines, I understand it is possible my class may be moved online, in full or partially. I understand that if my class is moved online, I will need access to technology and internet with as little as 24 hours' notice; and,
8. RECOMMENDATION: **I should sign up for the CVCC e2Campus Alerts** so that I will receive school-wide bulletins and update TEXTS/EMAILS not only about closing, but other emergency information I should know. For the latest emergency closing information, please sign up for CVCC e2Campus Alerts by going to the Campus Life section of the CVCC website and follow the link to e2Campus Alerts or visit <https://cvcc.omnilert.net/subscriber.php>.

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Signature:

By signing below, I agree to the above Student Expectations as a condition of returning to campus for in-person classes and I acknowledge that I have read and fully understand this document. I further acknowledge that I am accepting these personal risks and conditions of my own free will. I represent that I am 18 years of age or older and legally capable of entering into this agreement. If, at any time, I fail to follow any of these conditions, I understand I may be dismissed from my class without a refund.

Printed Name	Signature	Date
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Address

If participant is less than 18 years of age, the following section must be completed by a parent or guardian:

My child/ward is under 18 years of age and I am hereby providing permission for him/her to participate in this program, and I agree to be responsible for his/her behavior and safety during this event.

Child's Name	Parent or Guardian Signature	Date
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Address