



# Scoil Chríost Rí

## Drumnacurra

Causeway, Co. Kerry



### Return to Educational Facility Parental Declaration Form

<b>Child's Name:</b>	<b>Teacher's Name:</b>
<b>Parents/Guardian's Name:</b>	
<b>Name of Setting:</b>	
This form is to be used when children are returning to the setting after any absence.	
Declaration: I have no reason to believe that my child has an infectious disease and that I have followed all medical and public health guidance with respect to the exclusion of my child from educational facilities.	
Signed _____	
Date: _____	