



## CODE OF CONDUCT DURING COVID CRISIS

In an effort to ensure the continued health and safety for all members of the Veritas Preparatory Charter School community and to ensure personal responsibility to mitigate the spread of COVID, **ALL STAFF, STUDENTS, PARENTS/GUARDIANS, CONTRACTORS, AND VOLUNTEERS ARE REQUIRED TO COMPLETE THIS CODE OF CONDUCT PRIOR TO COMING TO THE BUILDING.** Failure to complete this form will preclude your ability to enter the building.

Please acknowledge understanding and agreement by checking the box next to each statement, signing and submitting before entering the building. Staff submit the signed form to Lynne Mills at [lmills@vpcs.org](mailto:lmills@vpcs.org) or by dropping off at the main office.

**Please read each statement and check each box before acknowledging below.**

- I understand and agree to complete the daily COVID ASSESSMENT TOOL each morning before coming to the building. If I experience any of the COVID symptoms, I am expected to stay home, contact my medical provider, and report my absence to Kara Wilkes as soon as possible. Also, I must contact Nurse Kim Ravizza for instructions prior to returning to the building.
- I understand and will do my part to abide by the expectations when in the building. These expectations include wearing a mask, social distancing, hand hygiene, and COVID specific protocols in place to ensure the staff, student body, families, contractors, and volunteers remain safe and healthy.
- I understand and will do my part away from school to abide by the same safety protocols expected at the building in an effort to protect others in our school community. I will stay home if I am exhibiting any COVID symptoms and follow the protocols outlined in this form and on our school's website.
- I understand that **close contact** to a COVID positive individual is defined as "only those who have been within 6 feet distance of the individual for at least 15 minutes during a day, while the person was infectious even if wearing a mask".
- I understand that if I am identified or self-identified as a **close contact**, I must quarantine based on current guidance, contact Nurse Kim Ravizza and follow instructions and communication before returning to the building.
- I understand that if a household member is symptomatic and tests for COVID and is awaiting test results, I may not come to the building until a negative test result is received. If the test is positive, I will follow the **close contact** policy above.
- I understand that I must inform the school, specifically Nurse Kim Ravizza if I have been tested for COVID and should not return to the building before learning the test result. Upon learning the test result, I will follow the proper protocol for my particular case, the instructions and communication with Nurse Kim Ravizza, and not return to the building until I have received approval by Nurse Kim Ravizza.
- I understand, and will abide by, the travel regulations and restrictions as outlined by the State of Massachusetts. The specifics of that order may be found on the State's website: [www.mass.gov](http://www.mass.gov) . In the event of any travel, I must inform Nurse Kim Ravizza and follow the instructions and communication received before returning to the building.
- I understand that the State of Massachusetts is encouraging people to get a FLU (Influenza) shot.
- I understand that failure to comply with the items within this CODE OF CONDUCT may result in disciplinary actions including termination.

**By signing below, I acknowledge that I have read and understand each statement above. I will continue to do my part as a staff member, both at and away from the building, to ensure the health, safety, and well-being of the Veritas Prep community.**

\_\_\_\_\_  
Staff Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print your name