



**2020-2021 Face-to-Face Instruction Student Agreement and Application**

Please print and submit both pages of this form to the appropriate Principal via email:

- Mr. Jeffrey Flores for the Frank L. Madla ECHS at [jflores@newfrontierspublicschools.org](mailto:jflores@newfrontierspublicschools.org)
- Dr. Monica Villarreal for Frank L. Madla ACA at [mvillarreal@newfrontierspublicschools.org](mailto:mvillarreal@newfrontierspublicschools.org)

Student: \_\_\_\_\_ ID#: \_\_\_\_\_

Grade: \_\_\_\_\_ Campus Name: \_\_\_\_\_

*(Initial each statement below.)*

**I understand that:**

\_\_\_\_ I have opted to have my child participate in face-to-face instruction and will ensure that he/she follows district and campus expectations for engagement and effort as outlined in this agreement. *I understand that NFPS may modify instruction models to reflect the current health situation.*

\_\_\_\_ I understand my child must follow safety, sanitation, and social distancing expectations as outlined in the NFPS 2020-21 Back-to-School Guide and communicated by the faculty and staff.

\_\_\_\_ I will monitor my child daily for any signs of COVID symptoms using the COVID-19 Screener application at home before attending school *(web-based application may be installed on an iPad, iPhone, android device and/or computer)*. I understand that if my child is feeling ill and/or fails the screener test, s/he must stay home and consult a medical professional regarding school participation.

\_\_\_\_ I understand that failure to comply with the mandate of using the COVID-19 Screener application as directed above may result in my child losing the option of face-to-face instruction.

\_\_\_\_ I understand that NFPS is limiting campus visitors to only those who are necessary, and all visitors must have an appointment and must be free of COVID-19 symptoms prior to arriving on campus.

\_\_\_\_ I acknowledge that I must wait until the start of a grading period to switch my child from face-to-face instruction to remote instruction and this must be approved by the school prior to making the change *(written requests must be submitted 2 weeks prior to the end of a grading period)*.

**New Frontiers requires the following for all students/families choosing face-to-face instruction:**

\_\_\_\_ My child will submit to temperature screening as necessary while on campus.

\_\_\_\_ My child is required to use hand sanitizer when entering a building, classroom, bus, and/or office.

\_\_\_\_ My child will adhere to all social distancing requirements (to the extent possible) and follow all transition guidance to minimize interactions with others.

\_\_\_\_ I will provide my child with a clean mask daily and have explained to them that they must wear the mask during the school day and when riding a bus (currently suspended) and should not share masks with anyone.

