

## Quarantine Form

### For Persons Who Have to Quarantine

Name of person to Quarantine \_\_\_\_\_

Date \_\_\_\_\_ Building \_\_\_\_\_

Position in the District \_\_\_\_\_ Contact Number \_\_\_\_\_

Quarantine start date: \_\_\_\_\_

**Reason for Quarantine:** Please select reason(s) below:

- Waiting on a COVID-19 Test**
  - Date tested \_\_\_\_\_
  - Testing site \_\_\_\_\_
  
- Caregiver of person infected with Coronavirus**
  - Date the COVID (+) person tested \_\_\_\_\_
  - Date of 1<sup>st</sup> Symptom \_\_\_\_\_
  
- Lives with someone who is infected with Coronavirus**
  - Date the person tested positive \_\_\_\_\_
  - Date of the 1<sup>st</sup> Symptom \_\_\_\_\_

Close Contact occurs if you were less than 6 feet of someone who has COVID-19 for a total of 15 minutes or more in a day, 24 hours.

- In close contact with someone who is infected with coronavirus**
  - Date of close contact with the person that tested positive \_\_\_\_\_
  
- In close contact with someone who has symptoms of Coronavirus**
  - Date the person in the household has or will be tested for COVID-19 \_\_\_\_\_
  - Date the person in the household has or will be tested for COVID-19 \_\_\_\_\_
  
- Lives with someone who has symptoms of Coronavirus and awaiting test results**
  - Dates the person in the household has or will be tested for COVID-  
\_\_\_\_\_
  - Dates the staff member has or will be tested for COVID-19  
\_\_\_\_\_
  
- Caregiver of someone who has symptoms of Coronavirus**
  - Date the person being cared for is tested or will be tested \_\_\_\_\_
  
- Traveled out of state or country**
  - Locations traveled to prior to returning \_\_\_\_\_
  - Date returned to New Jersey \_\_\_\_\_

\*Person will come off quarantine when Kimler Williamson, Supervisor of Nursing Services approves their release. Once she approves their release the Superintendent, Deputy Superintendent, Assistant Superintendent, and Cabinet Level Administrator are notified. The Assistant Superintendent/Cabinet Level Administrator, Chief of Facilities, Director of Food Services or Coordinator of Security will inform the building principal or Department Lead, that the staff member has been approved to come off quarantine. **The building Principal and Department lead must be notified before the staff member returns to work.**