**Template for parents to inform the APEEE of a case of Covid-19**

To be sent to:

**covid-19@apeeeb3.be** (APEEE)

*The above e-mail address and the information provided in this form are accessible exclusively to the APEEE.*

*The information will be treated as strictly confidential. Access is restricted to a limited number of persons that need to know, in order to take the appropriate decisions with a view to protecting the health and safety of all.*

*Important: please don’t forget to send a separate email to the School at the following address:*

**IXL-COVID19-NOTIFICATION@eursc.eu**

*N.B.* ***The School and the APEEE are not allowed to share any information concerning sensitive health data, and therefore a separate notification to both is indispensable****. This must happen as soon as parents receive the confirmatory positive results of a test.*

*Your timely notification of a confirmed case in conjunction with the full respect of all precautionary measures set out in the School and APEEE relevant communications will help us to reduce significantly the risks of a wider uncontrolled spread of the pandemic.*

**GENERAL INFORMATION**

|  |
| --- |
| Name of pupil: Class: |

My child has been tested for Covid-19 and has received a positive result.

|  |  |
| --- | --- |
| Date of onset of symptoms: | Date of test: |
| Other medical information relevant for the school: |

Last day at school:

**APEEE Services**

Please complete the following form if your child has been using one or more services **up to 3 days prior to the first symptoms, or before the to the last day of school**

* **CANTEEN**

Is the child enrolled to the Canteen? [ ]  Days:…………………………

* **BUS SCHOOL SERVICE**

|  |
| --- |
| 1. Please indicate the morning/afternoon bus lines used ………
 |

1. Days and routes actually used (please check the corresponding boxes)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Monday | Tuesday | Wednesday | Thursday | Friday |
| [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| [ ]  13.00[ ]  13.30 (Garderie) |
| [ ] 1st departure[ ] 2nd departure | [ ] 1st departure[ ] 2nd departure | [ ] 1st departure[ ] 2nd departure | [ ] 1st departure[ ] 2nd departure |

* **EXTRACURRICULAR ACTIVITIES**

Please indicate the extracurricular activities that the child has been attending **up to 3 days prior to the first symptoms, or to the last day of school**:

Signature of parent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_