



*Ní neart go cur le chéile*

**St Francis National School**  
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**County Louth**  
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|              |              |
|--------------|--------------|
| <b>Date:</b> | <b>Time:</b> |
|--------------|--------------|

Dear Parent,

You have been contacted as your child has displayed the following symptoms whilst in school.

|                        |  |
|------------------------|--|
| Cough                  |  |
| Fever                  |  |
| Breathing Difficulties |  |
| Other:                 |  |

The response to confirmed cases or outbreaks of Covid-19 in the community or in a school is the responsibility of and will be led and managed by **Public Health HSE**. All decisions as to appropriate actions following a confirmed case or outbreak will be made by their teams in the context of a full Public Health Risk Assessment procedure.

Your child has been safely brought from their classroom by a staff member to await collection. We strongly advise that you seek medical advice.

If your GP assesses the symptoms to be consistent with Covid-19 infection, and your child is referred for a test, at this point your child becomes a suspected Covid 19 case and household members including siblings must be withdrawn from school by their parent or guardian.

Should the test return as positive, the HSE (**not** the school) will invite parents of other children in the class to have their children COVID tested. At **no** point will the identity of any child with symptoms or a positive test result be released by the school. We completely appreciate the importance of confidentiality for families in this regard.

\_\_\_\_\_  
**Signed on behalf of St Francis NS**

\_\_\_\_\_  
**Signed by Parent**



I have sought medical advice and I confirm that my child \_\_\_\_\_ is well enough to return to school.

\_\_\_\_\_  
**Signed by Parent**

\_\_\_\_\_  
**Date:**