Mingo County Schools
Mask Choice Form

ATTENTION: Form must be signed and returned to the school no later than September 8, 2021

***** Masks are highly recommended for students and staff.**

***** Students who do not return forms with a choice marked will be required to wear a mask at school and on buses until the school receives a form with a choice marked.**

Parents and Families,

Mingo County Schools will honor your choice regarding whether your child will wear a mask at school. Students whose families require a mask must comply. If a student does not comply, the student will call home for direction and school-home communication. Discipline or a directive regarding the mask must come from the family, not the school, on this singular issue.

Child's Full Name_____

First **Middle** **Last**

Child's Grade _____

Please clearly mark the line indicating the choice for your child, print and sign your name, and date the form.
A form is required for each student.

_____ I **DO** want my child to wear a mask at all times while at school, except when eating.

_____ I **DO NOT** want my child to wear a mask at school.

Parent/Guardian Printed Name_____

Parent/Guardian Signature _____

Date of Signature_____

For Office Use Only

Form Received By: _____ Date: _____