**Face Covering for Enrolled Children 2 Years of Age and Older**

In accordance with new regulations Little Sunshine House will adhere to California Department of Public Health, Long Beach County Health Care Agency, and CDC recommendations in preventing the spread of COVID-19. This includes guidelines for face coverings for children age 2 and up.

**Children will need to and be encouraged to wear masks/face coverings:**

* At arrival and dismissal
* When children are inside the classroom working in close proximity of their peers

○ Appropriate and consistent use of masks is most important when students, teachers, and staff are indoors, and when social distancing of at least 6 feet is difficult to implement or maintain.

**Children will *not* be required to wear mask/face coverings:**

* During meal time
* If they have trouble breathing, are unconscious, or incapacitated or otherwise unable to remove the cloth face covering without assistance
* If they have a medical or mental health condition or developmental disability that prevents wearing a face covering
* When playing outdoors and engaging in physical activity such as running, jumping, climbing etc.
* *Note: Children will be strongly encouraged to wear masks when working in close proximity to their peers and not able to maintain 6 feet of physical distance from another person both indoor and outdoors.*

Children are more likely to respond in a positive and effective manner if they are allowed to have some control in the process. Some suggestions include encouraging children to select their own mask or decorate their mask with their design of choice. Parents can help support mask wearing by practicing at home, showing their children pictures of other children with masks on, role modeling and explaining the reasons for wearing masks in a developmentally appropriate manner. We thank you for your commitment and support to help keep the LSH staff, children and families safe as possible as we continue with our daily operations.

**Face Covering Exemption Form**

Child Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Medical Exemption**

The above-named child cannot medically tolerate a face covering due to the following medical condition:

 \_\_\_\_\_ Medical condition that causes trouble breathing

 \_\_\_\_\_ Medical condition that makes them unable to remove the cloth face covering without assistance

If unable to medically tolerate a face covering, is the child able to use a face shield

 \_\_\_\_\_Yes \_\_\_\_\_No

If no, please explain:

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**Alternative Exemptions**

As the parent/guardian of the above named-child, I request that my child be exempt from wearing a face covering for the following reason:

\_\_\_\_\_ Child does not have a medical condition that prohibits him/her from wearing a mask, however there may be behavioral, sensory, anxiety or other reasons that make it challenging to wear a face covering. ● If unable to tolerate a face covering, is the child able to use a face shield?

\_\_\_\_\_Yes \_\_\_\_\_No

If no, please explain:

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Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s Name (please print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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