



## HAYS CISD ELEMENTARY MASK PREFERENCE FORM

The Hays CISD continues to monitor and take steps to mitigate the effects of the COVID-19 pandemic on the Hays CISD community. The district believes that wearing masks in school buildings may help to minimize the number of students prevented from attending school, due to contracting COVID-19 or coming into contact with someone with COVID-19. We recognize that when a student is required to stay at home, it can have a significant impact on the normal operations of the family and risks potential learning loss. The district also understands that every parent has a specific preference regarding their child's use of masks, and respects parent and family choice on this matter. The district is hereby seeking additional information regarding your preference on your child's use of masks in school.

No student is currently being required to wear a mask. District staff may encourage students to keep their masks on while at school; however, for any parent of a student in pre-K through 5<sup>th</sup> grade who completes and returns this form, the district will respect that parent's preference to not encourage their student to wear a mask.

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I, parent or guardian of the below-named student, understand the forgoing and by my signature below express my preference for my student to **not** be encouraged to wear a mask while at school.

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Campus: \_\_\_\_\_

Teacher Name: \_\_\_\_\_

Parent or Guardian Name: \_\_\_\_\_

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