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*Each individual through positive learning experiences will be given opportunities to reach his/her full potential,
face life confidently, find fulfillment and be respectful in an ever-changing world.*

Return to School Parental Declaration Form

PLEASE BRING THIS TO SCHOOL ON THE FIRST DAY AND GIVE TO THE CLASS TEACHER. Your child will not be allowed to enter the school without it.

Childs name		
Parent/ Guardian		
Mobile Number		
(Please circle your answers below)		
Has your child visited any countries <u>outside Ireland</u> excluding Northern Ireland in the past 14 days?	Yes	No
Is your child suffering from any of the below flu or Covid-19 symptoms	Yes	No
Most common symptoms		
Fever	Yes	No
Dry cough	Yes	No
Tiredness	Yes	No
Less common symptoms		
Aches and pains	Yes	No
Sore throat	Yes	No
Diarrohea	Yes	No
Conjunctivitis	Yes	No
Loss of taste or smell	Yes	No
Rash or discolouration of fingers or toes	Yes	No