



# Rankin County School District

TRADITION OF EXCELLENCE

BRANDON FLORENCE McLAURIN NORTHWEST PELAHATCHIE PISGAH PUCKETT RICHLAND

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Post Office Box 1359 | Brandon, MS 39043 | p 601.825.5590 | f 601.825.2618 | [www.rcsd.ms](http://www.rcsd.ms)

## CONSENT FORM Mississippi COVID-19 Testing Program

RCSD is partnering with the Mississippi State Department of Health (MSDH) to offer voluntary school - based COVID-19 testing for unvaccinated individuals who are identified as close contacts and are symptom free. The screening tests (BinaxNOW antigen tests) are rapid tests provided to the School District by MSDH that provide results within 15 minutes.

There is no cost to you or your family for these screening tests.

The purpose is to provide an additional layer of protection to slow the spread of COVID-19 in school settings and extracurricular activities and prevent school exclusion during the quarantine. The screening program is only for unvaccinated individuals who do not have symptoms (those with symptoms should be evaluated by their primary care provider). Participants will be screened using the rapid test. The test uses a simple collection procedure by inserting a swab a short way in the nose and it is well tolerated.

All results will be reported individually by name and in aggregate form to MSDH and results will be provided to parents. Those who test positive will be excluded from the school setting and participation in school sponsored activities for 10 days from the date of the test as long as they have no symptoms. Those with a positive rapid who have a negative molecular-based COVID-19 test within 48 hours of the rapid positive do not require further exclusion and may return to the school setting. This only applies to molecular base tests (i.e., PCR) and does not include an additional rapid antigen test or antibody test.

If you wish to participate in this program, please complete the attached form and return the completed form.

Student/Staff Member Name (PRINT) \_\_\_\_\_

School Name \_\_\_\_\_ Grade \_\_\_\_\_

As the parent/legal guardian of the above-named child, I hereby authorize Rankin County School District to administer COVID - 19 screening/testing to me/my child. I understand that this authorization extends inclusively from the date of my signature through July 31, 2022. I understand that these screenings are free, and I will be notified by the school/school district of my child's COVID-19 test results.

Parent/Legal Guardian Printed Name \_\_\_\_\_

Parent/Legal Guardian Signature \_\_\_\_\_ Today's Date \_\_\_\_\_

For questions or concerns regarding your child's results, please contact the school district at 601-825-5590. School screenings/testing is supported by the Mississippi Department of Health (MSDH).

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*Dr. Sue Townsend*  
*Superintendent of Education*