

# Administrative Services

## VENDOR/VISITOR/VOLUNTEER COVID-19 AGREEMENT

Pleasant Valley School District requires all persons accessing district property to be assessed daily prior to entering the workplace for COVID-19. The person's signature below agrees to the following:

- I will assess myself **daily** to look for any of the following new or increasing symptoms in the last 24 hours:
  - Fever or chills
  - Fatigue
  - Sore throat
  - Congestion or runny nose
  - Cough
  - Headache
  - Diarrhea
  - Shortness of breath or difficulty breathing
  - Muscle or body aches
  - Nausea or vomiting
  - New loss of taste or smell
- The person will ask themselves the following questions:
- In the last two weeks have I:
  - Had contact with someone diagnosed with COVID-19?
  - Lived in or visited a place where COVID-19 is surging (Note – this does not count Ventura County where school district is located)?
- I will wear a mask at all times while on district property.
- I will adhere to all PVSD COVID-19 protocols while on district property.
- If I become symptomatic within 48 hours after being on district property – I will notify the administrator of the school site I was at.

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If you cannot agree to any of the requirements above, you may not go onto any district property.

As a vendor/visitor/volunteer that is going to be on district property, when you enter district property, you are attesting to the following:

- You are agreeing to all the requirements above
- You are not experiencing symptoms of or have had exposure to Covid-19
- You are fully vaccinated or will provide a negative COVID-19 test weekly (must provide proof of either)
- You do not have a fever higher than 99.5 with a no touch thermometer or 100.4 with other thermometer.

### Vendor/Visitor/Volunteer Acknowledgement Agreement

I acknowledge that I have read the above safety and health procedures to prevent the spread of COVID-19. I understand that it is my responsibility to be familiar with and agree to comply with these terms and procedures.

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Vendor/Visitor/Volunteer Name - Printed

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Vendor/Visitor/Volunteer Signature

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Date

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Received by

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Date Received

