

## **UNIVERSITY OF VIRGINIA**

### **2020-2021 Acknowledgement and Agreement to Comply with Public Health Measures**

It is a shared responsibility of all members of our community to maintain a healthy and safe environment during the COVID-19 pandemic. Consistent with that commitment, all incoming and returning students who will be living on Grounds or in the city of Charlottesville or Albemarle County during the 2020-2021 academic year are required to acknowledge and agree to comply with public health measures designed to protect the health and safety of all members of the University and local community (*i.e.*, Grounds, the city of Charlottesville, Albemarle County).

As conditions of my arrival and return to the local community, I agree that:

- **Public Health Measures:** I will follow recommended [public health measures](https://returntgrounds.virginia.edu/public-health-measures) (<https://returntgrounds.virginia.edu/public-health-measures>) by the University as well as federal, state, and local public health authorities by (1) practicing [social and physical distancing](#), (2) complying with signage and directions of the University regarding entering and exiting facilities, seating arrangements, and required separation, (3) engaging in personal prevention practices (such as hand sanitizing and [handwashing](#), [staying home and contacting Student Health and Wellness when sick](#), and covering my mouth when coughing or sneezing), (4) wearing a face covering in compliance with the University's [policy](#) on face coverings and the Governor Northam's Executive [Order](#) regarding face coverings, and (5) not hosting or attending any public and private gatherings in indoor and outdoor spaces beyond gathering size limits directed by the University or public health authorities;
- **Testing:** I will submit to testing for COVID-19 and other health conditions as directed by the University before and/or after my return to the local community;
- **Screening and Reporting:** I will follow the [most recent guidance](#) from the CDC if I experience any symptom(s) of COVID-19 or believe that I might have COVID-19 and report the symptom(s) immediately to Student Health and Wellness; I agree to provide information about my health as directed by the University;
- **Isolation and Quarantine:** I will submit to self-isolation or quarantine in a designated University facility (if I live on-Grounds) or in my own residence or an alternate location of my choice (if I live off-Grounds) and follow the directions of University officials regarding monitoring and self-care in any circumstance (1) where there is a reasonable belief that I have been exposed to an individual who has tested positive or suspected positive for COVID-19, (2) when I may be experiencing any symptom(s) consistent with COVID-19, or (3) if I test positive or suspected positive for COVID-19, until such time as my symptoms resolve and I may be tested and medically cleared to resume participation in University activities; and
- **Contact Tracing:** I will respond promptly to outreach from the Virginia Department of Health officials and provide all requested information to them regarding my contacts with individuals and cooperate with any contact tracing or other information gathering processes designed to identify risks of virus transmission to others.

I understand that my failure to adhere to University policies or public health measures and participating in activities or behaviors that intentionally or recklessly threaten the health and safety of our community may result in disciplinary proceedings and sanctions including barring my physical presence and participation in any classes, programs, or related activities, using any or all University facilities, suspension and/or dismissal from the University. I also understand that due to the fluid nature of the pandemic, the University may change its guidance, mitigation strategies, and protocols to protect my health and the safety and welfare of our community. I agree to follow any changes in the guidance, mitigation strategies, and protocols as soon as I am notified of those changes.

Acknowledgement

I understand that although the University of Virginia holds the health and safety of its community as paramount, there is no guarantee that I will not be exposed to or infected with COVID-19. I acknowledge that my physical presence in the local community as well as participation and utilization of facilities, services, and programs at the University of Virginia may carry certain risks, such as injury or illness including COVID-19 that cannot be eliminated regardless of the care and reasonable efforts taken to avoid and mitigate those risks. I also understand that I may be at higher risk for severe complications from COVID-19 if I have [particular conditions](#) identified by the CDC. I understand that I have the option to participate in University activities remotely and not live in the local community. Despite these risks, I chose to live in the local community to participate in University activities.

I have read and fully understand the 2020-2021 Acknowledgement and Agreement to Comply with Public Health Measures.

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Student

\_\_\_\_\_

Date

\_\_\_\_\_

Parent  
(only required if the student is under 18 years of age)

\_\_\_\_\_

Date