**Health Department Letterhead**

Date:

Dear School Administrator or Employer:

The \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County Health Department is providing this letter to excuse\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ from school or work. They are mandated to stay home and self-monitor for 14 days after their last day of exposure to an individual with a confirmed case of COVID-19. This quarantine is based on guidance from Kansas Department of Health & Environment (KDHE). This person has reported that their last day of exposure was on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

This means that they should not attend school or work during this time.

**This person has not been diagnosed with COVID-19.** These measures are being implemented nationally in order to interrupt the spread of COVID-19.

 Sincerely,