



9th March 2021

Dear Parent/Guardian

Please find below the days we will be providing Covid tests for each year group.

If you have already provided consent then students will be provided with a test on these days. If you have not consented yet but would like your child to have a test, please use the My Child At School App or return the consent form on the back of this letter. The form must be handed in before 12pm the day before the next test is due to be processed in time.

	Y11	Y10	Y7	Y8	Y9
Monday 08 March	Test 1				
Tuesday 09 March		Test 1			
Wednesday 10 March			Test 1		
Thursday 11 March	Test 2			Test 1	
Friday 12 March		Test 2			Test 1
Saturday 13 March					
Sunday 14 March					
Monday 15 March			Test 2	Test 2	
Tuesday 16 March	Test 3				Test 2
Wednesday 17 March		Test 3			
Thursday 18 March			Test 3	Test 3	
Friday 19 March					Test 3

Students will already be in school on these days and will be collected by a member of school staff from their lesson to have their test.

If you are unsure how to access the App or have any questions, then please contact the academy on 01472 871811 or via email on oaw.admin@oasiswintringham.org.

Yours sincerely

Mr A Robinson
Academy Leadership Team
Believe, Achieve, Succeed

@OAWintringham #proudtobeOAW
 OasisWintringham

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NHS Test and Trace consent form for COVID-19 testing

This common consent form has been designed for use by parents and carers of pupils and under 16s, pupils and students over 16 and staff. Underlined sections should be read as applicable and completed as follows:

- **For pupils and students younger than 16 years** - this form must be completed by the parent or legal guardian. Please complete one consent form for each child you wish to enrol.
- **Pupils and students over 16** can complete this form themselves, having discussed participation with their parent / guardian if under 18.
- **Staff** will complete this form themselves.

1. I have had the opportunity to consider the information provided by the school about the testing, ask questions and have had these answered satisfactorily, based on the information presented in the letter dated January 2021.
2. In the case of under 16s, I have discussed the testing with my child and my child is happy to participate. If on the day of testing they do not wish to take part, then they will not be made to do so and consent can be withdrawn at any time ahead of the test.
3. I consent to having / my child having a nose and throat swab for a lateral flow test.
4. I consent that my / my child's sample(s) will be tested for the presence of COVID-19.
5. I understand that if my child / my result(s) are negative on the lateral flow test I will not be contacted by the school except where they/you are a close contact of a confirmed positive.
6. If the lateral flow test indicates the presence of COVID-19, I consent to my child having / having a nose and throat swab for confirmatory PCR testing, which shall be sent the same day to an NHS Test & Trace laboratory.
7. I consent that I / they will need to self-isolate following a positive lateral flow test result, until the results of the confirmatory PCR have been received.
8. I agree that if my child's test results are confirmed to be positive from this PCR test, I will report this to the school and I understand that I/ my child will be required to self-isolate following public health advice.
9. I consent that if a close contact of my child tests positive but I / my child has tested negative, I / they will continue to attend school but will be tested every day at school for 7 days.

I confirm that I consent to all the statements above.	
Name of pupil/student/staff to be tested (print)	
Year group (if applicable)	
Name of parent or carer if under 16 (print)	
Signature	
Date	
Relationship to child if under 16	