534 Front Street, Chicopee, MA 01013 Tel: (413) 592-5135 / Fax: (413) 598-0187 ststanis@saintstansschool.org

Website: saintstansschool.org IG: @saintstanschicopee FB: @ststanislauschicopee

The Diocese of Springfield strongly encourages the wearing of masks. If a parent is choosing to



allow their child to not wear a mask in school, we ask that you document such on this form as well as provide any supporting documentation. This form only needs to be completed if you are choosing to not mask your child during school. If you have multiple children that this applies to, please complete a form for each child. This information you provide will remain private and confidential. We appreciate your collaboration with us on making this another successful school year. Thank you! Today's Date: _____ Students Name: _____ Student's Date of Birth: _____ Student's Grade for 2021-2022: Please detail below your rationale for allowing your child to not wear a mask in school. Please include and supporting documentation. Parent Signature Date Parent Printed Name

534 Front Street, Chicopee, MA 01013 Tel: (413) 592-5135 / Fax: (413) 598-0187 ststanis@saintstansschool.org Website: saintstansschool.org IG: @saintstanschicopee FB: @ststanislauschicopee

