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| 1. Name of the student testing positive including their year group and form group   Name:  Form Group: |
| 2. If you have a copy of the test result it would be very helpful to attach a photo of it please  Test result copy attached? |
| 1. Names of close contacts   Names of students that the person testing positive spent break and lunch time with:  Names of anyone they travelled to school with on the last two days in school: |
| 1. The date when the first symptoms began:   If there were no symptoms then the date on which the test was undertaken: |
| 1. Any other information that you feel would be helpful for us |

**Reporting a Positive Coronavirus Test result**

**To:** [**schoolclosure@cdarwin.com**](mailto:schoolclosure@cdarwin.com)