Healthy Together Pledge

This year will be unlike any other at Cincinnati College of Mortuary Science. The global pandemic will challenge us as individuals and test our community.

It’s clear the COVID-19 virus will be with us for the foreseeable future. We will likely see positive cases at CCMS – on-campus and in our local communities. We must act to both preserve and promote the health of our community. We each play a role in keeping ourselves and each other safe from the spread of COVID-19.

CCMS’ ability to keep our campus open and operating in person depends on all of us. If we act only in our own self-interest, CCMS may have to close the campus and resume fully remote operations. We must commit to the wellbeing of others. This commitment must remain intact on-campus and off-campus. We must rise to meet this challenge to stay healthy, together.

As a CCMS student and community member, we ask you to take care of yourself and your community and pledge your compliance to these expectations.

Understanding the Risks

I know that by engaging in campus activities, including attending classes and student organization activities, I may be exposed to COVID-19 and other infections. I also understand that despite CCMS’ efforts to reduce the risks of COVID-19, I can still contract COVID-19 and/or other infections that can cause serious illness and even death. I will make efforts to stay informed of CCMS COVID-related communications (https://www.ccms.edu/about-ccms/coronavirus-information/), as the college may modify guidelines and expectations as new information becomes available.

The Pledge

CCMS Healthy Together Pledge

This Pledge is required as a condition of my participation in face-to-face instruction and any on-campus activities.

I understand the risks of returning to campus and know that I may be exposed to COVID-19. I pledge to take responsibility for my own health and help prevent the spread of COVID-19 on campus and in the community. To reduce my risk and the risk to others, I pledge to:

**Engage in Prevention**
- Wear a face covering in all indoor spaces on campus (except when eating – in designated areas) and outdoors when physical distancing is not possible*.
- Practice physical distancing (6-10 ft apart).
- Practice frequent handwashing and hand sanitization.
- Clean up after myself in common areas and classrooms (cleaning products will be available throughout common spaces and classrooms).
• Comply with COVID-19 campus signage (directional, capacity, etc.).
• Limit personal indoor gatherings to fewer than ten people and engage in physical distancing.
• Not host or attend gatherings/parties where physical distancing is not possible.
• Students should consult with their health care provider and get a flu shot, if medically advisable.
• Clean and sanitize all surfaces I touch in class.

Participate in Symptom Assessment, Testing, Contact Tracing, Quarantine and Isolation
• Conduct daily symptom monitoring for the following symptoms and stay home from classes/activities if I am feeling ill:
  o Cough 
  o Shortness of breath/difficulty breathing
  o Fever of 100.4 or higher
  o Chills
  o Repeated shaking with chills
  o Body aches/muscle pain
  o Headache
  o Sore throat
  o Loss of taste or smell
  o Nausea or vomiting
  o Diarrhea
• Read the full list of up-to-date symptoms on the CDC website: (https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html)
• Fill out the CCMS COVID-19 reporting form if showing any symptoms above and/or diagnosed with COVID-19.
• Report any known or potential exposure to COVID-19 to President Lechner or Vice President Ivey.
• Participate in contact tracing if requested by CCMS or the Hamilton County Health District.
• Temporarily relocate to a designated quarantine location if deemed necessary, after being in close contact with someone who has tested positive for COVID-19, and remain until released by President Lechner or Vice President Ivey.

*There may be university approved exceptions regarding the wearing of face covering. Students who cannot wear a face covering due to medical or disability-related reasons should contact the President at president@ccms.edu, 513.761.2020.

Please retain this document for your records and easy reference.

Sign and return the signature page below.
Healthy Together Pledge
Acknowledgement

**Student or Faculty/Staff Signature**

I acknowledge that if I engage in repeated, non-compliant behaviors to this Pledge, I may be referred to the President for disciplinary action up to and including suspension, dismissal, or termination. I have read, understood, and agree to comply with this Pledge.

Name (print) ____________________________________________________________

Signature ______________________________________________________________

Date __________________________ Your current semester: ___S1 ___S2 ___S3 ___S4