



**LOS ANGELES COUNTY YOUTH@WORK
PARENTAL WORKSITE CONSENT DURING COVID-19**

I _____ (parent/guardian name) authorize _____ (youth's name) to participate in the Work Experience component of the Youth@Work program at a physical worksite during the Novel Coronavirus (COVID-19) pandemic. A physical worksite is a private, public or non-profit organization that partners with Youth@Work to provide hands-on real-world work experience in a specified job. COVID-19 is a respiratory disease that can impact all aspects of daily life, including the workplace. Participants may have the opportunity to be placed at essential worksites, which render highly important goods and services that if otherwise interrupted would endanger the life, health or personal safety of individuals or a population, depending on availability.

The Center for Disease Control (CDC) has confirmed a national situation and established guidelines for individuals to protect themselves from COVID-19. In accordance with the CDC, Governor Newsom of California, has proclaimed several –Safer at Home Orders- since the onset of this pandemic. The Los Angeles County Department of Public Health (DPH) has also issued local guidance in line with the Governor's Executive Orders. On May 29, 2020, DPH released an updated Order defining mandatory protocols and procedures for the safe reopening at work and in the community for control of COVID-19.

I recognize that County of Los Angeles Workforce Development, Aging and Community Services (WDACS) is closely following the COVID-19 Orders released by DPH and has put in place reasonable controls and preventative policies for worksites to adopt before any youth will be placed for work experience. Measures include social distancing and wearing protective face masks. WDACS is also monitoring the situation very closely and will immediately remove a youth from a worksite found to be unsafe.

Given the nature of the virus, I understand there is some risk of the youth named above in becoming exposed to COVID-19 by virtue of program participation at the worksite. I understand that COVID-19 may cause additional risks, some or many of which may not currently be known at this time.

I understand the hazards of COVID-19 and I acknowledge and understand that that the circumstances regarding COVID-19 are changing from day to day and that guidelines are regularly modified and updated and I accept full responsibility for familiarizing myself with the most recent updates

(Signature required on next page)

I, hereby acknowledge and agree to the following:

1. I consent to the participation of the minor noted in this waiver in work experience at a physical worksite through the Youth@Work program; notwithstanding the risks associated with COVID-19.

2. I acknowledge and fully agree to hold harmless the County, WDACS, WDACS' employees and its Youth@Work partners (worksites, service providers) from any COVID-19 related risk and liability which may result from the minor noted in this waiver from participating in Youth@Work during the COVID-19 pandemic. This means I will fully assume the risk of any illness or death related to COVID-19 arising from the noted minor being on the premises and participating in work experience. I hereby release, waive, discharge, and covenant not to sue the aforementioned partners related to this program.

IN SIGNING THIS AGREEMENT, I ACKNOWLEDGE AND REPRESENT THAT I have carefully read the foregoing Wavier of Liability, fully understand its terms and sign it voluntarily as my own free act and deed; no oral representations, statements, or inducements, apart from the foregoing written agreement, have been made; I am at least eighteen (18) years of age and fully competent; and I execute this Agreement for full, adequate and complete consideration.

I understand that I may cancel this authorization at any time by notifying the designated Agency Staff person indicated below by telephone or writing:

AJCC: _____ **AJCC Representative:** _____

Phone Number: _____ **Email:** _____

My signature below confirms that I have fully read and understand the COVID-19 Worksite Waiver and acknowledge, accept, and fully agree to the conditions of its terms.

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Relationship to minor: _____