

Dear Families,

The attached form is required, by the state, to be in each student's file along with a copy of your child's immunization records. We will need your medical provider to sign this form even if your child's immunization record is signed. The state will confirm that we have this document and **that it is signed and dated by your child's medical provider** when they come to do their site inspection. Therefore, this form must be on file prior to your child beginning preschool. You will be asked to update this form annually per state guidelines.

You may return the signed form to the school in person or your doctor may scan and email it to tmckay@madison.k12.in.us or **fax it to the attention of Tara McKay at 812-274-8507**. If needed, we are happy to email you a copy of the blank form so you can email or fax it to the doctor's office in order to assist in this process. Thank you in advance.

Sincerely,

Tara McKay
Madison Consolidated Preschool Coordinator
tmckay@madison.k12.in.us
812-273-8528

THIS IS A REQUIRED FORM

Day Care Provider Name _____

Child's Name _____ Date of Birth _____

Parent's Name _____ Phone _____

Address _____
Street Address City State Zip

Record Date of Immunization

	Birth	1 mo	2 mo	4 mo	6 mo	12-18 mo	2-3 yr	4-6 yr
Hep B								
DtaP / DTP / Td								
Hib								
MMR								
IPV								
Varicella								
PCV / Prevnar								
Hep A								

Child has documented history of Varicella Disease ____ No ____ Yes If yes, age _____

Please check the appropriate response.

- Child has received complete age-appropriate immunizations.
- Child is currently in the process of receiving complete age-appropriate immunizations.

ONE BOX ABOVE MUST BE CHECKED BY THE HEALTH CARE PROVIDER

Comments: *(Please list immunizations excluded for medical reasons)* _____

Parent comments: *(Please indicate religious objection, if any)* _____

Signature _____ Date _____
(Health Care Provider's Signature and Date is **Required**.)

Printed Name and Title _____
(Printed Name and Title is **Required**)

This form must be updated annually.