WALLINGTON SCHOOL DISTRICT HEALTH SERVICES <u>HEALTH SCREENING PERMISSION</u>

(Grades 3, 6, 8, and 11)

The Wallington School District offers a Health Screening by the School Physician to students in Grades 3, 6, 8 and 11 to help identify potential health problems. Although this is not a required screening the Wallington school district provides it free of charge. Parents will be given the opportunity for their child to participate in this screening. If you have any questions regarding the examination procedures, please contact the school nurse.

If your child has had a physical within the last year please have the doctor fill out the Universal Child Health Record form which can be obtained from the health office or the school website and return it to the school nurse as soon as possible.

Please check your preference below, sign and return the permission form to the school nurse. Your response will be in effect for as long as your child is a student in the Wallington school district OR until you notify the school nurse in writing otherwise.

PLEASE INDICATE YOUR CHOICE BELOW. SIGN AND RETURN TO THE SCHOOL NORSE	
HEALTH SCREENING PERMISSION (GI	RADES 3, 6, 8, 11)
I DO NOT want my child to have a health s	creening performed at school
I give permission to have a health screenin	g performed by the school physician
Student's Name	-
Parent's Signature	 Date

Jefferson Annex Nurse: Stacy Geltrude, RN973-836-4700 ext. 306FW Gavlak Nurse: Linda Finke, RN973-777-4420 ext.207High School Nurse: Mary Bartlett,RN973-777-0808 ext.111