## DIXON UNIFIED SCHOOL DISTRICT

| Anderson Elementary |  |
|---------------------|--|
| 415 East C Street   |  |
| Dixon CA 95620      |  |
| Phone:707-678-5508  |  |
| FAX 707-678-2073    |  |

**Tremont Elementary** 355 Pheasant Run Dixon CA 95620 Phone:707-678-9533 FAX 707-678-0298

CA Jacobs Intermediate 200 North Lincoln Dixon CA 95620 Phone:707-678-9222 FAX 707-678-1245

**Dixon High School** 555 College Way Dixon CA 95620 Phone: 707-693-6330 FAX 707-678-9318

Maine Prairie 305 East C Street Dixon CA 95620 Phone: 707-693-6340 FAX 707-678-4892

Gretchen Higgins 1525 Pembroke Dixon CA 95620 Phone: 707-678-6271 Fax: 707-693-1960

## **HEALTH REQUIREMENTS FOR SCHOOL**

**IMMUNIZATIONS:** Students must present written verification of the following immunizations. The verification must include at least the month and year and be signed by the doctor or clinic:

- 1. Polio 4 doses, but 3 doses are enough if at least one was given after the 4<sup>th</sup> birthday.
- 2. Diptheria, Pertussis, Tetanus (DTP/DTaP/DT) 5 doses, except that 4 doses are enough if at least one was given after the 4<sup>th</sup> birthday.
- 3. Measles, Mumps, Rubella (MMR) 2 doses given after the age of 1 year.
- 4. Hepatitis B at least 3 doses
- 5. Varicella (Chicken Pox) 1 dose or written verification from your physician that your child has had the disease. 2 doses are required for students 13 and older.
- 6. <u>TB(PPD) Skin Test</u> required for entering Kindergarten students and for students coming from outside the United States

## NOTE: Your child will not be able to attend school, if he/she is due for any of the required immunizations.

## PHYSICAL EXAMINATION

The attached Report of Health Check-up for School Entry must be completed by your physician or clinic before your child enters 1<sup>st</sup> grade. The school nurse recommend that you schedule your child for a health check at the same time he/she receives the immunizations required for school, thus fulfilling both requirements at the same time.

The completed certificate can be returned to the school office before it closes in June or at the opening of the next semester. If you prefer, you can mail it to the school nurse at your child's school.

The required physical examinations are free for children on Medi-Cal and for children from low or moderate income families. You can get a free health check-up from the Solano County Health Department (707-435-2010); Dixon Family Practice (707-635-1600).

If you have any questions about the above requirements, feel free to contact the school nurse at Anderson (678-5508); at Tremont (678-9533); at Gretchen Higgins (678-6271) or at the District Office (678-5582 Ext. 8014).

Student Name: Birthdate:

Phone #: \_\_\_\_\_

Parent Signature:

| To be completed by school staff only  |    |    |    |    |  |                        |                 |    |           |    |    |  |  |
|---|----|----|----|----|--|------------------------|-----------------|----|-----------|----|----|--|--|
| Before the first day of school your child will need to receive the immunizations checked below: |    |    |    |    |  |                        |                 |    |           |    |    |  |  |
| Polio   | #1 | #2 | #3 | #4 |  | DTP/DTaP/DT            | <sup>-</sup> #1 | #2 | #3        | #4 | #5 |  |  |
| MMR   | #1 | #2 |    |    |  | Hepatitis B            | #1              | #2 | #3        |    |    |  |  |
| Varicella   | #1 |    |    |    |  | TB Skin Test Date Done |                 |    | Date Read |    |    |  |  |
|   |    |    |    |    |  |                        |                 |    |           |    |    |  |  |

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