**School District Letterhead**

**Sample: End of School Year Packet**

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

Dear Parent(s) and Guardian(s):

We want to take this opportunity to remind you of important health requirements for the upcoming school year. Please review the information below and reach out if you have any questions.

* **Health Examinations (physicals):**
* New York State law requires a health examination\* for all new entrants and students in grades  
   Pre-K or K, 1, 3, 5, 7, 9, & 11;
* Yearly, for students participating in athletics (sports);
* For working papers as needed; or
* When required by the Committee on Special Education (CSE) or Committee on Pre-School Special Education (CPSE).

***\*****A dental exam form is also requested at the same time a grade-level health examination is required*.

**Attached is the required** [**New York State Required Health Examination Form**](https://www.schoolhealthny.com/cms/lib/NY01832015/Centricity/Domain/137/5.18.2023_health-exam-form_Final.pdf) **to be used by the healthcare provider.** An Electronic Equivalent Form is also accepted.

* **Immunizations (shots/vaccines):**
* New York State law requires all students entering or attending (including remotely) any New York State school (public, nonpublic, and charter schools) must receive all doses of immunizations required for their grade level in order to attend school. The immunization requirements for each grade level are outlined on the [NYSDOH Immunization Requirements for School Entrance/Attendance Chart](https://www.health.ny.gov/publications/2370_2026.pdf)*.*
* A request for a medical exemption to an immunization must be completed annually on this form: [Medical Exemption Statement for Children 0-18 Years of Age](https://www.health.ny.gov/forms/doh-5077.pdf) *(outside NYC)*

[Medical Request for Immunization Exemption](https://www.schools.nyc.gov/docs/default-source/default-document-library/medical-request-for-immunization-exemption-English)*(NYC only)*

**Attached is the** [**NYSDOH Immunization Requirements for School Entrance/Attendance Chart**](https://www.health.ny.gov/publications/2370_2026.pdf)***.***

* **Prescription & Over-The-Counter Medications**

If your student requires medications during the school day, the school must have the following:

* A written healthcare provider order. Please note: For independent students to self-carry and self-administer their own emergency rescue medications, a written attestation is also required; and
* Written parent/guardian consent; and
* An adult must bring all medication to school in the original labeled prescription or over-the-counter bottles/packaging; and
* Any special supplies or equipment for the nurse to administer the medication must also be provided to the school.

If you have any questions, please contact your school nurse using the contact information below.

School Nurse: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_