



**Health Services
Immunization/Physical Compliance Notice**

Date: _____

Dear Parent/Guardian of: _____

Florida Statute 1003.22 requires prior to students being enrolled or to attend a public school that a current up-to-date Florida Certificate of Immunization, Form 680, completed by a Florida physician or by a Florida county health department and a certificate of physical examination be on file with the school.

- School records indicate that your child does not have the required **Physical Exam**, Florida Law (F.S.232.0315) on file (must dated less than 1 year before school entry date).
- School records indicate that your child does not have the following **Immunizations** required by Florida Law (Florida Statute 232.032) on file.

DTP	MMR	Polio	Varicella	Hep B	Tdap

Please take this letter to your private physician or to the Alachua County Public Health Unit (call for an appointment or information at: 352-334-7900) to have your child receive the proper immunization. A parent must accompany the student to the immunization clinic.

The School must be brought an updated HRS 680 immunization certificate and/or physical exam form HRS 3040 by the following date: _____ or on this day he/she will be temporarily excluded from school.

Sincerely,

Principal Signature

If you have any questions or concerns please call your school nurse:

_____ at: _____
School Nurse *Phone/Extension*