

St. Luke's Preschool & Kindergarten
Registration Packet 2019-2020
www.stlukes-church.com
School Administrator: Mary Schuldheisz
Email: mschuldheisz@stlukes-church.com

253-941-3000, ext. 108

Dear Parents,

We thank you for considering St. Luke's as a place to nurture and teach your young child during a most formative time in his/her life. It is sincerely our privilege to serve you and your family in any way possible.

We at St. Luke's believe that we exist to serve people. Our purpose as a church is to seek out and bring people into a personal relationship with Jesus Christ as their Savior and Lord. Our purpose in our Early Childhood Program is to affirm children and their families of God's love for them. We partner with parents to provide a solid foundation meeting the spiritual, mental, emotional, and physical needs in this important developmental stage of their child's life.

We are blessed with a well-trained staff offering several class choices for 3, 4 and 5 year olds. St. Luke's has been providing quality Early Childhood Education in the Federal Way community for almost fifty years.

Attached, you will find a brief description of the educational programs that we offer to help you make a decision on the best educational environment for your child.

We ask that you provide us with the information required on the following attached forms and return them to the office <u>at the time of registration:</u>

- 1. Registration Form
- 2. Student Profile Form
- 3. Emergency Information Form
- 4. Permission to Photograph
- 5. Family Photograph Form
- 6. Immunization Form

The Immunization Form is required by the State of Washington prior to school entrance for all children. Students will be enrolled in the order in which we receive <u>completed</u> forms and registration fee. (Returning students do not need to complete a second immunization form unless new vaccines and/or immunizations have been administered since completion of last received form.)

Please note that the **first tuition payment is due July 1**. The second payment is due September 1st. All payments thereafter are due by the 1st of each month.

We look forward to a year filled with exciting growth for your child. By providing your child with a safe environment surrounded by loving, caring Christian teachers, developmentally appropriate curriculum, positive social interaction, and meaningful experiences and activities, we will, with our Lord's direction, nourish the seed that has been planted in your child's life, a seed that will grow and continue to blossom.

In His Service,

TO EARS OF EXCELLENCE IN

Mary Schuldheisz School Administrator

ST. LUKE'S PRESCHOOL AND KINDERGARTEN Programs and Classes 2020-2021

Preschool for 3-year-olds

Age 3 by August 31, 2020 Tuesdays and Thursdays 9:15 am – 12:15 pm

*Monthly Tuition for 10 months: \$185 - 1st tuition payment due 7/1/2020, secures enrollment and is non-refundable. 1st tuition payment is due 7/1/2020, secures enrollment, will be applied in advance to the final month's (June) tuition, and is nonrefundable.

Registration Fee: \$175 - nonrefundable and due w/registration form(s) (Note: If you are re-enrolling, an alumni or a member of St. Luke's the Registration Fee is \$125.00)

**Supply Fee: \$50 - nonrefundable and due 7/1/2020

Pre-Kindergarten

Age 4 by August 31, 2020

Tuesdays, Wednesdays and Thursdays

9:15 am - 1:15pm

Students bring a packed lunch and eat together as a class.

*Monthly Tuition for 10 months: \$295 - 1st tuition payment due 7/1/2020, secures enrollment and is non-refundable. 1st tuition payment is due 7/1/2020, secures enrollment, will be applied in advance to the final month's (June) tuition, and is nonrefundable.

Registration Fee: \$175 - nonrefundable and due w/registration form(s) (Note: If you are re-enrolling, an alumni or a member of St. Luke's the Registration Fee is \$125.00)

**Supply Fee: \$75 - nonrefundable and due 7/1/2020

S.T.E.A.M.

Age 4 by August 31, 2020

Fridays

9:15 am - 12:15pm

*Monthly Tuition for 10 months: \$75-1st tuition payment is due 7/1/2020, secures enrollment and is non-refundable. 1st tuition payment is due 7/1/2020, secures enrollment, will be applied in advance to the final month's (June) tuition, and is nonrefundable.

Students may enroll in this class as a supplement to Pre-K or as a stand-alone class.

Registration Fee: \$60 (Note: Waived for currently enrolled students.)

**Supply Fee: \$40 - nonrefundable and due 7/1/2020

Kindergarten

Age 5 by August 31, 2020

Monday – Friday

8:45 am - 3:15 pm

Students bring a packed lunch and eat together as a class.

*Monthly Tuition for 10 months: \$565 – 1st tuition payment due 7/1/2020, secures enrollment and is non-refundable. 1st tuition payment is due 7/1/2020, secures enrollment, will be applied in advance to the final month's (June) tuition, and is nonrefundable.

Registration Fee: \$175 - nonrefundable and due w/registration form(s) (Note: If you are re-enrolling, an alumni or a member of St. Luke's the Registration Fee is \$125.00)

**Supply Fee: \$100 - nonrefundable and due 7/1/2020

***Tuition Discounts

- 1. St. Luke's members will receive a 10% discount off school tuition for each child enrolled.
- 2. School families with more than one child enrolled will receive a 10% discount off the tuition of the second child enrolled and each child thereafter.
- 3. Students enrolled in both St. Luke's Childcare and School will receive a 10% discount off school tuition.

*Monthly tuition is based on an annual rate with payments divided evenly over ten months. The monthly tuition amount remains the same regardless of the number of days your child will be attending class during any given month (i.e. vacation, non-school days, sick days.) If payment is not received by July 1, you will be contacted either by phone or mail. If payment is not received by July 15, your student may be removed from the class list and put on a waiting list.

The 2nd tuition payment is not due until Sept. 1 and will be applied to the September tuition. The remaining tuition payments are due thereafter by the 1st day of each month.

** The supply fee is in lieu of bringing supplies to your child's classroom. All supply fees are due with the registration fee and are non-refundable.

^{***}Tuition discounts may not be stacked or combined.

St. Luke's Preschool 3-Year-Old Program 2020-2021

Age Criteria: 3 by August 31, 2020

Days: Tues/Thurs

Times: 9:15 AM - 12:15 PM

Class Description

This is a first exposure class that fosters a sense of security and confidence in the child through its structure and routine. Children are encouraged to be independent, active and responsible members in their classroom experiences. Curriculum encompasses colors, shapes, letters, numbers and patterns, as well as exposure to fine motor skills such as letter formation and scissor use. Daily activities include Bible stories, calendar, weather, art, music, learning center and outdoor play. Special activities are chapel, field trips and holiday celebrations.

Entering Student Profile

Independent toileting skills
Able to verbally express desires and needs
Able to separate from parents
Able to follow simple directions
Able to attend to "tasks" for 10 minutes

Teaching Topics

Bible – Chapel time as a school, Bible stories from both Old and New Testaments, Christian songs, prayers, and devotions which aid in creating an atmosphere for developing a personal relationship with Jesus Christ.

Language Arts – Recognition of alphabet letters and sounds, rhyming; reinforced by use of alphabet tubs and Show and Tell. Later in the year, children will learn to verbally spell and formulate the letters of their names.

Math – Exposure to mathematical concepts such as recognition of numbers 1-10, shapes, and patterns.

Science and Social Studies – Discovery and exploration of their world and the world around them, i.e. animals, nature, customs and cultures.

Art and Music – Children alternate between Free Art (child guided) and Directed Art (teacher guided) using various artistic mediums. Music is introduced into the program using a range of songs, rhymes, instruments and special programs.

Gross and Fine Motor Skills – Assembling puzzles, coloring, scissor use (activities introduced later in the year), regular outdoor playtime which helps to develop/strengthen running, jumping, climbing and throwing a ball.

St. Luke's Pre-Kindergarten Programs 2020-2021

Age Criteria: 4 by August 31, 2020 Days: 3-Days per week T/W/TH Times: 9:15 AM – 1:15 PM

Class Description

The Pre-Kindergarten programs encourage children to learn through observation, imitation, experimentation, practice, and interaction with other children and teachers. We focus on the spiritual, emotional, physical, social, and academic growth of our students. This class provides rich readiness skills in a structured group setting as well as many opportunities for creative expression and individual choice activities.

Entering Student Profile

Independent toileting skills
Able to verbally express desires and needs
Able to separate from parents
Able to follow simple 1 and 2 step directions
Able to attend to "tasks" for 10 minutes

Teaching Topics

Bible – Chapel time as a school, Bible stories from both Old and New Testaments, Christian songs, prayers, and devotions which aid in creating an atmosphere for developing a personal relationship with Jesus Christ.

Language Arts – Recognition of alphabet by name, sound, and phonemic awareness. Communication skills will be learned and strengthened through social interaction with peers, following directions, listening to rhymes, stories and singing songs.

Math – Students are exposed to numbers 1-100, and counting by rote to 100 with an emphasis on writing and number values for numbers 1-20. Introduction to geometric shapes, patterning and sequencing. Students develop an understanding of size and positional concepts.

Science and Social Studies – Students explore our world through different thematic units such as weather, plants, animals, etc.

Art and Music – Students express their personalities through the use of many different art mediums. Singing is an important part of each school day. Children have the opportunity to share their musical talent with their families several times a year.

Gross and Fine Motor Skills – Different activities are implemented in the daily curriculum to help children develop their gross and fine motor skills. Running, skipping, painting, writing, scissor use, assembling puzzles, and using manipulatives are part of our daily routine.

St. Luke's S.T.E.A.M. Program 2020-2021

Age Criteria: 4 by August 31, 2020

Days: Friday

Times: 9:15 AM – 12:15 PM

Class Description

This class explores God's world through the topics of <u>Science</u>, <u>Technology</u>, <u>Engineering</u>, <u>Art and Math</u>. These subjects are a part of daily life. Imagination and curiosity are cultivated as students explore S.T.E.A.M. through experiments, discussions, books, crafts, games and more. The rapidly developing brain turns the ordinary into extraordinary with S.T.E.A.M. This class can be a stand-alone class or a supplement to St. Luke's Pre-K classes.

Entering Student Profile

Independent toileting skills
Able to verbally express desires and needs
Able to separate from parents
Able to follow simple 1 and 2 step directions
Able to attend to "tasks" for 10 minutes

Teaching Topics

Science – Students conduct fun, silly experiments in a safe environment. A discussion and conclusion on the topic accompany the experiment.

Technology – Use of simple tools such as pencils and rulers are implemented, in addition to more complex tools such as magnifying glasses and a microscope.

Engineering – Students engage in innovative activities that involve problems and testing out a solution.

Art – Students express their personalities through the use of different art mediums as well as expression through drama and music.

Math – Math concepts are introduced through games and activities which incorporate numbers, patterns, shapes and organizational skills.

St. Luke's Kindergarten Program 2020-2021

Age Criteria: 5 by August 31, 2020 (copy of birth certificate required)

Days: Monday – Friday Times: 8:45 AM – 3:15 PM

Class Description

Our Kindergarten curriculum is designed to value the unique skills and abilities of each student while preparing them for the academic standards and requirements of First Grade. A Christ-centered environment nurtures students to develop intellectually, spiritually, emotionally, physically, and socially.

Entering Student Profile

Able to take care of personal needs
Able to verbally express desires and needs
Able to separate from parents
Able to follow directions
Able to attend to "tasks" for 10 minutes
Able to use crayons and scissors
Able to work independently, with peers and in a group setting
Able to demonstrate a basic knowledge of numbers and letters
One year of preschool experience recommended

Teaching Topics

Bible – Chapel time as a school, Bible stories from both Old and New Testaments, Christian songs, prayers, and devotions which aid in creating an atmosphere for developing a personal relationship with Jesus Christ.

Language Arts – Recognition of the alphabet by name and sound, rhyming, recognition of numerous sight words, phonics instruction to develop reading skills, shared reading of quality literature, a variety of writing experiences, and building comprehension of the things we read as a class and as individuals.

Math – Students develop a foundation of skills relating to number concepts, measurement, geometry, data/graphing, algebraic concepts such as patterning and sorting, and solving simple addition and subtraction equations.

Science and Social Studies – The use of specific units as well as seasonal STEM projects and experiments help emphasize scientific and social exploration of the world around them. Arranged field trips highlight certain units. (Past trips have included the Museum of Flight, Northwest Trek, etc.)

Art and Music – Students explore art concepts through the use of colors, lines, shapes and different types of media. Musical instruction through singing, playing instruments, and movement provides a rich environment for musical expression and for learning important academic concepts.

Gross and Fine Motor Skills – Students are exposed to a variety of projects and experiences to develop fine motor skills. Emphasis is placed on learning how to use daily utensils. Gross motor skills such as hopping, skipping, galloping and ball skills are taught.

ST. LUKE'S PRESCHOOL AND KINDERGARTEN **REGISTRATION FORM 2020-2021**

PROGRAMS (Circle class choice)

Preschool 2-Day T/TH

Pre-K 3-Day T/W/TH

STEAM FRI

Kindergarten M-F 8:45am-3:15pm

9:15am-12:15pm

9:15am-1:15pm

9:15am-12:15pm

FAMILY BACKGROUND

| Student's Name: | Name | e to be used in school: | Male _ | Female |
|--|---------------------|---------------------------|----------------------------|--------|
| Address: | | Citv: | Zin Code: | |
| Home Phone #: | | | 2,p 00d0 | |
| Child lives with: Mother Fat | | | | |
| Mother's Name: | | Cell Phone # _ | | |
| Mother's Address: | | | | |
| Mother's Employer: | | | | |
| Work Phone #: | Em | ail: | | |
| Father's Name: | | Cell Phone #_ | | |
| Father's Address: | | | | |
| Father's Employer: | | | | |
| Work Phone #: | Ema | ail: | , | |
| Other Children in Family | Age | | School Currently Attending | |
| Current marital status of student's p Has there been a divorce, death, illr explain) | arents: | in the family which might | affect your child? (If so, | |
| CHURCH AFFILIATION | | | | |
| Are you currently a member of a par | ticular church? Yes | s No | | |
| Church Name/Address | | | | |
| Pastor's Name | | | | |
| s student baptized? | | | ol? | |
| GENERAL | | | | |
| How did you hear about St. Luke's? | Word of mouth | St. Luke's Website | Internet Social Media | |
| Other (Please list where) | | | | |
| Vhat do you feel will be the advanta | | | | |
| | | | | |

ST. LUKE'S PRESCHOOL AND KINDERGARTEN STUDENT PROFILE FORM 2020-2021

| Student Name | | Date |
|---|--------------------|--|
| 1. Does your child have a | ny health issues | the school should be aware of? |
| 2. Does your child have a | | |
| 3. Primary language spoke | en at home? | |
| 4. Has your child previous | | |
| If so, where and for how | / long? | |
| Do we have permission | to contact prior t | eachers if needed? Yes No If yes, please provide the teacher's |
| 5. Is your child right or left-l | nanded? | |
| | | d thoughts in English? Yes No |
| | | guage(s)? |
| | | nderstood by those outside of his/her family? Yes No |
| 8. Do you have concerns re | | |
| 9. Does your child use lange | uage to interact v | vith peers? Yes No |
| 10. Does your child use wor | ds to solve probl | ems or when upset? Yes No |
| Does your child express | anger appropriat | tely? Yes No |
| If not, please explain | | |
| 12. Can your child express f | | |
| If not, please explain | | |
| | | nces of behaviors? Yes No |
| | | |
| 14. Has your child received of | r are you conside | ering any type of therapy? (Please circle all that apply) |
| Speech/Language | Physical | Occupational Vision |
| Behavioral | Counseling | Learning Disabilities |
| 15. How do you discipline you | ır child? | |
| | | rom family members? Yes No |
| | | , |
| 17. Can your child transition for | om one activity t | o another easily? Yes No |
| 18. Can your child adjust to ch | | |
| | | |
| 19. Has your child had experie | | |
| | | |
| | | tting? Yes No |

| Please specify | |
|----------------|--|
| | |
| | |
| | |

ST. LUKE'S PRESCHOOL AND KINDERGARTEN STUDENT PROFILE FORM 2020-2021

| Student Name | | | | Date | |
|--|--|---|---|-----------------------------------|---|
| 21. Check any cha | racteristics that | apply to your chi | ld: | | |
| Cries easi Destructiv Sucks thui | e | Temper tantru Sleeping prob Eating probler | lems _ | Sulks Whines Daydreams | Fearful in new situati Easily angered Jealous |
| 22. Is your child sel (Students must b | f-sufficient in the | restroom? Yes | No e starting schoo | ol. no Pull-Uns) | |
| 23. Can your child d | | | | | |
| 24. Does your child | | | | | |
| | | | | | |
| 26. What do you exp | ect your child to | a cognine through | Al Daniel I | | rience? |
| | | | | | |
| | | ild's teacher to k | now about you | child? | |
| 7. What else would | you like your ch | ild's teacher to k | now about you | child? | |
| 7. What else would 3. When is the best Mother: | you like your ch time to call or m Morning | ild's teacher to k | now about you | child? | |
| 7. What else would | you like your ch time to call or m | ild's teacher to ki | now about you | child? | |
| 7. What else would 3. When is the best Mother: Father: | you like your ch time to call or m Morning Morning | eet with you? (Pl Afternoon | now about your lease circle) Evening Evening | child?Anytime | |
| 7. What else would 3. When is the best Mother: Father: | you like your ch time to call or m Morning Morning | eet with you? (Pl Afternoon | now about your lease circle) Evening Evening | child?Anytime | |
| 7. What else would 3. When is the best Mother: Father: What is the most elephone Home telephone minimum enrollment is restration fee will be refund | you like your chetime to call or me Morning Morning Cell Phone call or me ded. | eet with you? (Pleafternoon Afternoon Contact you? (Pleafternoon) Texting | now about your lease circle) Evening Evening ease circle ther Email | Anytime Anytime provide number or | email address on line below) |
| 7. What else would 3. When is the best Mother: Father: What is the most elephone Home telephone minimum enrollment is restration fee will be refund | you like your chetime to call or morning Morning Cell Phone equired. If the minimated. | eet with you? (Pleafternoon Afternoon Contact you? (Pleafternoon) Texting | now about your lease circle) Evening Evening ease circle ther Email | Anytime Anytime provide number or | email address on line below) |

_____Date: _____

ST. LUKE'S PRESCHOOL AND KINDERGARTEN **EMERGENCY and CARE INFORMATION FORM** 2020-2021

| Child's Name: | Class: | Male | Female |
|--|---|-------------|----------------|
| Address: | City: | | Zip: |
| Home Phone # | Birthday: | | |
| Mother's Name: | Ce | ll Phone #: | |
| Mother's Employer: | W | ork Phone # | |
| Father's Name: | Ce | ll Phone #: | |
| Father's Employer: | Wo | ork Phone # | |
| Physician's Name: | Phone # | | |
| Special health issues or comments: | | | |
| Child Care Provider: | | | |
| Alternate Phone #: | , | | |
| lternate persons (local) to be notified in case 1) Name: Home Phone #: | Relationship: | · | |
| Cell Phone #: | | | |
|) Name: | Relationship: | | |
| Home Phone #: | Work Phone # | | |
| | | | |
| Cell Phone #: | | | |
| Cell Phone #: | | afte | er school dail |
| Cell Phone #: My child may be picked up by: My child will go to: | | afte | er school dai |
| Cell Phone #: | | afte | er school dai |
| Cell Phone #: My child may be picked up by: My child will go to: | ccording to the instructions I have | afte | er school dai |

_____ Date: _____

ST. LUKE'S PRESCHOOL AND KINDERGARTEN **EMERGENCY and CARE INFORMATION FORM** 2020-2021

| Child's Name: | Class: | Male | Female |
|--|---|---|--|
| Address: | | | |
| Home Phone # | | | |
| Mother's Name: | Cell | Phone #: | |
| Mother's Employer: | | | |
| | | | |
| Father's Name: | Cell | Phone #: | |
| Father's Employer: | Wor | rk Phone # | - |
| Physician's Name: | Phone # | | |
| Special health issues or comments: | | | |
| Child Care Provider: | Phone # | | |
| Alternate Phone #: | | | |
| Alternate persons (local) to be notified in case of (1) Name: Home Phone #: Cell Phone #: | Relationship: Work Phone # | | |
| (2) Name: | Relationship: | | |
| Home Phone #: | | | |
| Cell Phone #: | | | |
| My child may be picked up by: | | afte | r school dailv. |
| My child will go to: | | | |
| Further instructions or comments: | | | |
| I authorize school personnel to act according authorized physician cannot be reached at the time is urgent in the judgment of the school authoritic student (properly accompanied) to the hospital cassume full responsibility for payment of any service Signature: | e of an emergency, and if immes, I authorize and direct the or doctor most easily accessibles rendered. | ediate observatio school authoritie le. It is underst | n or treatment s to send the ood that I will |
| | Duto | | |

St. Luke's Lutheran Church Permission to Photograph Form

| I give permission for my child to be photographed videotaped at St. Luke's |
|---|
| Lutheran Church events. Such photographs/videotape may be used by St. Luke' |
| for publicity or educational purposes. |
| |
| |
| |

| Child's Name | |
|---------------------------|--------------------------------|
| Parent or Guardian's Name | Parent or Guardian's Signature |
| Date | |

FAMILY PHOTOGRAPH 2020-2021

As part of St. Luke's School registration packet we ask for a picture of your family. The photo will be used only to help us know who you are and what your names are. It will not be published or given out to anyone.

| Circle class choice |): | | | |
|-------------------------------------|------------------------|--------------------|---------------------|---------|
| Preschool 2-Day T/ | /TH Pre-K 3-Day T/ | /W/TH STEAM | Kindergarten | |
| Child's Name: | | | | |
| Please attach the p | hoto here: | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Please write the nan Photograph: | nes of your family mer | mbers below in the | order they appear i | in your |
| | | | | |
| | | | | |



515 s 312th street federal way, wa 98003

tel 253.941.3000 fax 253.941.8994

www.stlukes-church.com

June 2020

RE: Immunization Record Requirements

Dear Parents or Guardians,

Starting August 1, 2020, all immunization records turned in to schools or child care centers are required by state laws to be medically verified. Immunization records must be turned into the school on or before the first day of attendance. This means immunization records turned in to the school must be from a health care provider, or you must attach paperwork from a health care provider to your handwritten form that shows your student's records are accurate. Your child cannot attend school until you provide these records.

Here are some examples of medically verified immunization records:

- A completed Certificate of Immunization Status (CIS) signed by a health care provider. Find the CIS form by visiting https://www.doh.wa.gov/SCCI and clicking on "Certificate of Immunization Status."
- A CIS filled out by you or another parent/guardian with medical records attached.
- A CIS printed by a health care provider or school from the Washington State Immunization Information System.
- A CIS printed from https://wa.myir.net which is a free Department of Health online tool that allows families to view and print their official immunization records themselves. Go to https://wa.myir.net/register to begin the sign-up process.

If you are requesting an exemption from one or more of the immunization requirements, you must provide the school a completed Certificate of Exemption.

If your child already meets immunization requirements and has records on file with the school, you do not need to do anything. If you aren't sure, or if you have any questions, please contact Mary Schuldheisz, 253-941-3000, ext. 106 or mschuldheisz@stlukes-church.com.

In Christ, Mary Schuldheisz Interim School Administrator mschuldheisz@stlukes-church.com 253-941-3000, ext. 108



DOH 348-744 January 2020
To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email civil rights adoh.wa.gov.



Health (CIS) Reviewed by: Date:

Please print. See back for instructions on how to fill out this form or get it printed from the Washington Immunization Information System.

| Parent/Guardian Signature Required Date Date Parent/Guardian Signature Required Date Parent/Guardian Signature Required Date Parent/Guardian Signature Required Date Date Parent/Guardian Signature Required Date Date Date Date Parent/Guardian Signature Required Date Da | Child's Last Name: | First Name: | | Middle Initial: | Birthdate (MM/DD/YY): | Sex: |
|--|--|---|------------------|--------------------------------|--|---|
| Tetanus, Pertussis) Jature Required Date Date | on to my child's school to shanformation System to help th | are immunization information ie school maintain my child's | n with the | l certify that the inform | nation provided on this form is cor | rect and verifiable. |
| Tetanus, Pertussis) Signature Required Date D | | | | A | | |
| Anil Care/Preschool Date Date Date Date Date Date Date Date | an Signature Required | | Date | Parent/Guardian Sig | nature Required | Date |
| Required Vaccines for School or Child Care Entry Tetanus, Pertussis) a) 1) 1) 1) 1) 1) 1) 2) 2) 3) 3) 3) 3) 4) 4) 4) 5) 5) 6) 6) 7) 6) 7) 7) 8) 8) 8) 8) 8) 8) 8) 8 | ool and Child Care/Preschool or Child Care/Preschool | Date MM/DD/Y | Date MM/DD/YY | Date Date MM/DD/YY MM/DD/YY | | on of Disease Immunity |
| Tetanus, Pertussis) a) a) between ages 11-15 denzae type b) coccal) iffed by IIS Recommended Vaccines (Not Required for School or Child Care Entry) avirus) booccal) coccal) | Require | | d Care Entr | A | | are provider use only |
| aria, Pertussis) a) b) charace type b) coccal) coccal) Accommended Vaccines (Not Required for School or Child Care Entry) avirus) coccal) | ohtheria, Tetanus, Pertussis) | | | | If the child named Varicella (Chicken | in this CIS has a history of |
| 1 certify that the child named on this CIS has between ages 11-15 1 certify that the child named on this CIS has between ages 11-15 2 Rubella 3. Rubella 3. Rubella 3. Rubella 4. Diphtheria Mumps Other named on this CIS has be attached. 5 Rubella 5 Rubella 6 Diphtheria Mumps Other named on this CIS has be attached. 7 Others MUST also be attached. 9 Diphtheria Mumps Other named on this CIS has be attached. 9 Diphtheria Mumps Other named on this CIS has be attached. 9 Diphtheria Mumps Other named on this CIS has been named on | s, Diphtheria, Pertussis) | | | | by blood test (tite | r) it MUST be verified by a |
| Detween ages 11-15 Detween ages 11-15 Detween ages 11-15 Detween this CIS has been detailed history of Varicella (Chicken) | Jiphtheria) | | | | ido od tod tod | |
| Second Period P | dule used between ages 11-15 | | | | a verified hist | id named on this CIS has: ory of Varicella (Chickenno) |
| disease(s) marked below. Lab report include by IIS Recommended Vaccines (Not Required for School or Child Care Entry) incoccal) Recommended Vaccines (Not Required for School or Child Care Entry) incoccal) incorcal) incorcal) incorcal disease(s) marked below. Lab reporting the representation of the peatities of the peati | hilus influenzae type b) | | | | ☐ laboratory evi | dence of imminity (titer) to |
| Second S | lio) | | | | disease(s) mg for titers MU | arked below. Lab report(s) ST also be attached. |
| Control of the patrice of the patr | s, Mumps, Rubella) | | | | ciroditario C | |
| Hepatitis B Rubella Rubella Hib Tetanus Recommended Vaccines (Not Required for School or Child Care Entry) Hib Tetanus Varicella Varicella Varicella Varicella Mococcal Hib Tetanus Varicella Varicella Varicella Varicella Hib Tetanus Varicella Varice | Pneumococcal) | | | | | <u>,</u> |
| Ommended Vaccines (Not Required for School or Child Care Entry) Measles Varicella Licensed healthcare provider signature (MD, DO, ND, PA, ARNP) Printed Name | ckenpox) sease verified by IIS | | | | | Rubella |
| Licensed healthcare provider signature (MD, DO, ND, PA, ARNP) Printed Name | Recommended Vac | | ool or Child | Care Entry) | Measing | Varicella |
| Licensed healthcare provider signature (MD, DO, ND, PA, ARNP) Printed Name | Flu (Influenza) | | | | | |
| Licensed healthcare provider signature (MD, DO, ND, PA, ARNP) Printed Name | | | | | | |
| | Papillomavirus) | | | | Licensed healthcar (MD, DO, ND, PA, | |
| | (Meningococcal) | | | | | |
| | gococcal) | | | | Printed Name | |
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