

Dear Parents,

Thank you for considering Woodland Christian School for your child's education. We consider it a privilege to provide a well-balanced Christian Education that focuses on the development of your child academically, spiritually, and socially. Our highly qualified Christian teachers are committed to that goal through the application of spiritual truth in a dynamic learning environment. For that reason, our teachers emphasize the importance of individual instruction and encourage your child to build on their strengths and to improve on their weaknesses. All of this takes place in a safe and academically challenging environment.

Enclosed you will find all necessary paperwork to begin the enrollment process. Please contact the school office with any questions. We would love for an opportunity to share our program with you in person and provide a tour of our campus.

Sincerely,

Mr. Justin Smith Administrator



PRESCHOOL CAMPUS 1616 West Street Woodland, CA 95695 Phone: 530-662-0994 FAX: 530-406-0900 ELEMENTARY SCHOOL 1787 Matmor Road Woodland, CA 95776 Phone: 530-666-6615 FAX: 530-406-0900 **MIDDLE SCHOOL** 1787 Matmor Road Woodland, CA 95776 Phone: 530-406-8800 FAX: 530-406-0900 HIGH SCHOOL 1787 Matmor Road Woodland, CA 95776 Phone: 530-406-8800 FAX: 530-406-0900

WWW.WOODLANDCHRISTIAN.ORG

2017-2018 New Student Application and Information Grades K-12

Welcome to Woodland Christian School. Completing this packet is the first step in the application and enrollment process for new students. A checklist of required forms and procedures for each grade level is provided below. Applicants will not be considered for enrollment until the school receives all required documents and appropriate fees. Please be sure to print legibly, in black or blue ink. Some documents are two sided; please make sure that both sides are completed in full. If you have any questions, please call the school office. Please keep this checklist for your records.

Once your completed application is received, you and your student will be scheduled for student testing and for an interview with the principal. Upon acceptance to Woodland Christian Schools, a separate registration packet will be required to complete enrollment.

Kindergarten Application Checklist	STEP I — APPLICATION
\Box \$90 Application Fee	To start the application process, WCS must receive all items
Enrollment Application	from the appropriate grade level checklist. Forms and fees
□ Report of Health Examination for School Entry (<i>due by Aug. 1st</i>)	may be turned in to the appropriate school office.
ELEMENTARY SCHOOL APPLICATION CHECKLIST	Step 2—Assessment and Interview
Grades 1-5	After turning in the application paperwork, your child(ren)
\Box \$90 Application Fee	will be scheduled for an interview with the appropriate
Enrollment Application	grade-level principal. Assessment for grade placement, if
	needed, will take place during this time as well. Parents will
MIDDLE SCHOOL APPLICATION CHECKLIST	be notified of acceptance and grade level recommendation
Grades 6-8	at the end of this appointment.
\Box \$90 Application Fee	
Enrollment Application	STEP 3—COMPLETION OF SCHOOL REGISTRATION
Educator's Recommendation	Upon acceptance, the following completed and signed forms
	must be submitted to the appropriate grade-level office
HIGH SCHOOL APPLICATION CHECKLIST	along with the payment of fees in order to complete your
GRADES 9-12	student's registration:
□ \$90 Application Fee	Registration Form
Enrollment Application	\Box \$75 Registration Fee
Educator's Recommendation	Tuition Agreement for New Students
Character Reference	Parent/Guardian Cooperation Statement and
□ Substance Abuse Policy (Signed by Parent and Student)	Acknowledgement of Policies.
□ Most Current Grades/Transcript (Official transcript required in June in order to register for fall classes)	
Most Current Standardized Test Results	

WOODLAND CHRISTIAN SCHOOL 2017–2018 Tuition and Fee Information

2017-2018 WCS Application/Registration Fees

Grade	New Student Application Fee (Non-Refundable)	New Student Registration Fee (Non-Refundable)	Returning Student Early Re-Enrollment Fee Due by February 28, 2017 (Non-Refundable)
Grades K-12	\$90	\$75	\$75
International	\$150	\$400	\$75

2017–2018 Published Tuition Rates & Student Fees (Tuition + Student Fees = Annual School Fees) *Discounts cover published tuition only, NOT Student Fees

Tuition Rates					
Child	Kindergarten Half Day	Kindergarten Full Day	Elementary Grades 1–5	Middle School (6–8)	High School (9–12)
First	\$3865	\$5370	\$5370	\$5975	\$6360
Second	\$3480	\$4830	\$4830	\$5370	\$5710
Third +	\$1855	\$1855	\$1855	\$1855	\$1855
International	\$5865	\$7900	\$7900	\$8745	\$9355

	Student Fees					
Grade	Student Fee	Activities Fee	Camp/Retreat Fee		Total Fees	
Kindergarten	\$275	\$70	_		\$345	
Grades 1–3	\$275	\$60	-		\$335	
Grade 4	\$275	\$60	\$330		\$665	
Grade 5	\$275	\$80	_		\$355	
Middle School	\$305	_	\$350		\$655	
High School	\$325	—	\$250		\$575	

Additional Information

Re-Enrollment Fee: The returning student early enrollment fee is \$75 per student. This is non-refundable and is due February 28, 2017. Beginning March 1, 2017, the re-enrollment fee will be \$150.00.

New Student Application Fee: This fee is \$90 per new student and is submitted at the time of initial application. This fee is non-refundable. New-student applicants who have been tested and interviewed will not receive official acceptance until after March 1, 2017, which allows our current students to secure their placement.

New Student Registration Fee: Upon acceptance, a registration fee of \$75 per student is due to secure each student's placement. This fee is non-refundable.

Student Fee: This fee covers textbooks, workbooks, classroom and art supplies, achievement testing, building use, and computer equipment.

Elementary Activities Fee: This fee covers class field trips, promotion supplies, and art projects. It is non-optional and is billed along with your tuition and other fees.

Camp/Retreat Fees: Special camps and retreats are planned each year for fourth-grade, middle-school and high-school students. The camps and retreats are a part of their learning experience, and attendance is considered non-optional.

- Fourth Grade 49er Camp: The fourth-grade classes participate in a three-day California history 49er camp, centered around learning what life was like during the Gold Rush days in California. The cost of the camp is \$165 and is billed along with your tuition and other fees (\$330 total, which includes student and one parent).
- Middle School Alliance Redwoods Retreat: Middle-school students attend a week-long Alliance Redwoods retreat during the early fall. They participate in a diverse, challenging program that includes inspiring worship, Biblical teaching, and outdoor education. Sixth graders follow a creation-based science curriculum emphasis, while 7th and 8th graders participate in a combined program of outdoor education and individual/team-building challenges. The cost for the middle school five-day retreat is \$350 and will be billed along with your tuition and other fees.
- High School Alliance Redwoods Retreat: High-school students attend an annual three-day retreat to Alliance Redwoods. This spiritual retreat has become a key component of our school year. Students participate in a number of activities such as ziplining, wall climbing, swimming and team-building games that help them grow in their relationships with the Lord, their teachers, and their peers. The cost for the high-school three-day retreat is \$250 and is billed along with your tuition and other fees.

Payments: The student fees are charged per student, per year. The fees are added to the annual tuition and apportioned according to your choice of payment plan. Payments are made to the school and are due on the first of each month. School payments are established by choices made on the enrollment agreement. The first payment is due June 1, 2017. This payment is non-refundable.

Payment Plans: There are five payment plans available: payment in full; payment by semester; or 10, 11, or 12 equal monthly payments made by check or cash, ACH Direct Debit, or Credit Card Auto Debit. The first payment is due June 1, 2017. The remaining payments start in July, August, or September depending on which monthly plan you choose. All accounts must be paid in full by May 31 of each year.

Discounts: Families that return (all children) will receive a 2.5% discount off of published tuition rates. This discount also applies to children who go from WCS preschool to WCS kindergarten. Families who refer a new, full-time (K–12) student will receive a one time \$600 tuition credit per new student (\$200 for part-time students). This discount only applies if the child is accepted and attends WCS. The credit will be pro-rated if the new student starts after September 1. Discounts cover published tuition only, not Student Fees, camp/retreats, or class fees.

Parent Service Hours: Each family with a child enrolled in grades 1–12 is required to serve 30 hours per year. Single-parent families as well as families with a child enrolled in preschool or kindergarten are required to serve 15 hours per year. Families with a parent serving in the armed forces overseas are required to serve 15 hours per year. Parents can log their volunteer hours by sending an email to www.parenthours@wcs-k12.org or by turning them in to the office. Hours can be fulfilled in many ways, including but not limited to: serving on a committee, helping in the classroom, yard duty, copying papers, driving on field trips, or serving on a campus beautification day. Grandparents, as well as adult aunts and uncles, can also serve the hours. Hours served during the summer will count toward the upcoming year.

In lieu of fulfilling the service hours, families may opt to pay \$15 per each hour of the requirement (\$450) or opt to serve a portion of the hours and pay \$15 per hour for any unserved hours. At the end of the year, hours will be tallied and a bill will be sent out for any unserved hours.

Financial Aid: A limited amount of financial aid is available. These grants are based on financial need. Even if you have received financial assistance in the past, you must submit a new application for the new academic year. All applications should be submitted by March 15, 2017 for the 2017–2018 school year. If approved, notification will be sent out during the month of May or upon acceptance to WCS. Information on how to apply online is available in the school office.

Billing: The accounts receivable policy for all families is as follows:

- High-school students are not allowed to take semester exams if financial, athletic and library accounts are not current.
- Accounts must be current at the end of each quarter for families to receive a report card, have access to the online grade book, and continue with WCS in the following quarter.
- All accounts are charged a \$25 late fee per family if payment is received later than the tenth of the month.
- Accounts with returned checks are charged a \$25 fee, which is in addition to the late fee.
- Records are not released to parents unless all accounts are current.



2017-2018 EXTENDED CARE INFORMATION GRADES K-5

PRESCHOOL CAMPUS 1616 West Street Woodland, CA 95695 Phone: 530-662-0994 FAX: 530-406-0900

ELEMENTARY SCHOOL 1787 Matmor Road Woodland, CA 95776 Phone: 530-666-6615 FAX: 530-406-0900 MIDDLE SCHOOL 1787 Matmor Road Woodland, CA 95776 Phone: 530-406-8800 FAX: 530-406-0900 HIGH SCHOOL 1787 Matmor Road Woodland, CA 95776 Phone: 530-406-8800 FAX: 530-406-0900

Extended Care is a service for parents who need supervision for their children before and/or after school. Extended Care is an extension of the school day, opening at 7:00 AM and closing at 6:00 PM. Playground supervision and a homework room are provided from 4:00 to 5:00 PM. This time is designed for children to work alone on their homework. It is the child's responsibility to use this time when needed. An afternoon snack is provided at 3:15 PM. No outside food or drinks are permitted in Extended Care.

If you arrive prior to 7:00 AM, please wait with your children in the car until Extended Care opens. Supervisors will sign your child in. At 8:00 AM, students are sent to class. Kindergarteners and first graders will be walked to class by a supervisor.

After school Extended Care staff will sign children in. Parents are responsible for signing children out at the end of the day. Parents are charged according to the sign-in sheet. If parents are not able to pick their child(ren) by 3:00 PM, students will be signed into Extended Care for their safety. The charge for any child signed in after school until 3:30 PM is \$3 and this will be billed to you by the WCS bookkeeper.

Children going to Extended Care may bring clothes to change into after school. They must wear socks if they wear sandals. No spaghetti straps, no bare midriffs, no spandex shorts; and no inappropriate printing on t-shirts are permitted.

Toys may be brought from home, but please realize that Extended Care staff is not responsible for lost, broken, or stolen items. All cubbies and hanger areas must be cleaned out daily. Nothing should be left in Extended Care.

Please feel free to contact Extended Care Staff if you have any questions.

2017-2018 Extended Care Rates for Grades K-5 During the Academic Year

Before School	7:00 AM-8:00 AM	\$3 per child
N		
Minimum After School	2:45 PM - 3:30 PM	\$3 per child
Half Afternoon	2:45 PM - 6:00 PM	\$13 per child
NUM DAYS		
Half Afternoon	12:00 noon - 3:30 PM	\$13 per child
Full Afternoon	12:00 noon - 6:00 PM	\$24 per child
Full Day (more than six hou	rs) 7:00 AM - 6:00 PM	\$26 per child
к 6:00 рм		
Every 5 minutes		\$5 per child
	N Minimum After School Half Afternoon HUM DAYS Half Afternoon Full Afternoon Full Day (more than six hou	N Minimum After School 2:45 PM - 3:30 PM Half Afternoon 2:45 PM - 6:00 PM MUM DAYS Half Afternoon 12:00 noon - 3:30 PM Full Afternoon 12:00 noon - 6:00 PM Full Day (more than six hours) 7:00 AM - 6:00 PM ER 6:00 PM

There is a \$2 discount per day for half afternoons and/or full afternoons for two children.

PAYMENT POLICY: Extended Care fees are due and payable at the end of each month. Check with an Extended Care staff member or the school office for your balance. A copy of your bill is available on request.

Fee: \$ 🗆 C Testing/Interview D	Y/ Cash □ CC □ Ck # Date:// □ Cum Requested	WOODLAND	CHRISTIAN	OFFICE USE ONLY	Google Doc QB
		A.S.	EST. 1974		
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		WWW.WOODLAI	NDCHRISTIAN.OR	G	
	201	7-2018 Enf	ROLLMENT A	PPLICATION	
STUDENT IN	FORMATION				
Applying for G		Full-day Kindergarten 🏾 1			1 🛛 12
Full Legal Name		First	Middle	// Preferred First Name	
Date of Birth:	//	_ Age: Gender			
			Student So	ocial Security Number (Entering grad	es 11 & 12 only)
Primary Address (All school mailings will be	sent to this address)	City	State	Zip
Student E-mail Ad			t Home Phone	Student Cell Phone	
				or Latino 🛛 Pacific Islander 🗆 Othe	
Language most of	ten spoken at home:		Other Langua	ages	
PARENT INF	ORMATION				
PARENTS' MARI	TAL STATUS: Married	□ Divorced □ Remarried □	Single 🛛 Deceased (🗆 Fa	ather 🗆 Mother) 🗖 Other	
		father 🛛 Guardian 🗖 Shared	Custody		
□ 100%		Spo	use Name, if different tha	an Mother:	
□ 50%	Father or Guardian:				
Weekends only Mailing list only				Work Phone: ()	
□ NO contact		rent than student)		Cell Phone: ()_	
	Place of Employment:	atching gift program? 🗆 Yes 🛛] No		Unlisted
E-mail Address:	Does employer have a m		- 110		Home Work
STUDENT LIVES	WITH: 🗆 Mother 🗖 Step	-mother 🗆 Guardian 🗆 Shar		an Father:	
□ 100%			use Name, il umerent tha		
□ 50% □ Weekends only				Mart Dhanas (
☐ Mailing list only	-			Work Phone: ()	
NO contact		rent than student)		Cell Phone: ()	
	Place of Employment:				
		atching gift program? 🗆 Yes 🛛] No	/	Unlisted
E-mail Address:					Home 🛛 Work
			comonto will be sent its	the empile addresses are sided. Place	a cond
	to the e-mail address prov		cements will be sent via	the e-mail addresses provided. Pleas	e sena
г	∃Father □Mother [] Both □ I do not have an e-i	mail address and will nee	d all communication mailed or sent h	ome with my child.

2017-2018 Enrollment Application Continued

EDUCATIONAL BACKGROUND

List the schools student has attended in the past, beginning with the m	lost recent.	
School	Grade(s) Attended	Phone
Address	City	_State Zip
Reason for leaving:		
School	Grade(s) Attended	Phone
Address	City	_State Zip
Reason for leaving:		

PURPOSE OF ENROLLMENT

How did you hear about WCS?						
🛛 Woodland Christian Pr	reschool 🛛 🛛 Website	□ Family/Friend	□ Parent is Alum of WCS	□ Continuing WCS Family		
🗆 Phone Book 🛛 🗆 Adv	vertising (please specify): _					
Referred by current W	CS family. Name of person	who referred you to	WCS:			
Please rank the following reasons for enrollment, with 1 being the most important:						
Christian Emphasis	Quality Academics	Safety	LocationOther			
What do you expect to find at WCS the	at you would not find in ar	nother school?				

FAMILY INFORMATION: Please list all children under the age of 18 living with the family.

Name	Date of Birth	2017–2018 Grade Level	School Attending in 2016–2017

CHURCH INFORMATION:

Does family attend church? Yes No	Church attendance: Weekly Once a month Less than once a month
Pastor Name:	Name of Church:

I CERTIFY THAT THE INFORMATION SUPPLIED ON ALL DOCUMENTS IS TRUE AND COMPLETE:

_/____/____

GUIDE TO IMMUNIZATIONS REQUIRED FOR SCHOOL ENTRY



Requirements by Age and Grade Before Entering:

Vaccine	4-6 Years Old Elementary School at Transitional-Kindergarten/ Kindergarten and Above	7-17 Years Old Elementary or Secondary School	7th Grade*
Polio (OPV or IPV)	4 doses (3 doses OK if one was given on or after 4th birthday)	4 doses (3 doses OK if one was given on or after 2nd birthday)	
Diphtheria, Tetanus, and Pertussis	5 doses of DTaP, DTP, or DT (4 doses OK if one was given on or after 4th birthday)	4 doses of DTaP, DTP, DT, Tdap, or Td (3 doses OK if last dose was given on or after 2nd birthday. At least one dose must be Tdap or DTaP/DTP given on or after 7th birthday for all 7th-12th graders.)	1 dose of Tdap (Or DTP/DTaP given on or after the 7th birthday.)
Measles, Mumps, and Rubella (MMR or MMR-V)	2 doses (Both given on or after 1st birthday. Only one dose of mumps and rubella vaccines are required if given separately.)	1 dose (Dose given on or after 1st birthday. Mumps vaccine is not required if given separately.)	2 doses of MMR or any measles-contain- ing vaccine (Both doses given on or after 1st birthday.)
Hepatitis B (Hep B or HBV)	3 doses		
Varicella (chickenpox, VAR, MMR-V, or VZV)	1 dose	1 dose for ages 7-12 years. 2 doses for ages 13-17 years.	

*New admissions to 7th grade should also meet the requirements for ages 7-17 years.

INSTRUCTIONS:

California schools are required to check immunization records for all new student admissions at TK/Kindergarten **through** 12th grade and all students advancing to 7th grade before entry.

- 1. Notify parents of required immunizations and collect immunization records.
- 2. Copy the date of each vaccine from the child's immunization record to the California School Immunization Record (Blue Card, CDPH-286) and/or supplemental Tdap sticker [PM 286 S (01/11)] or enter into an approved electronic system that prints a Blue Card.
- 3. Compare number of doses on the Blue Card to the requirements above.
- 4. Determine whether child can be admitted.

Continued on next page.



ADMIT A CHILD UNCONDITIONALLY WHO:

- · Has all immunizations required for their age or grade, or
- Entered Transitional Kindergarten with
 - a valid personal beliefs exemption (PBE) for missing shot(s) that was signed within 6 months prior to entry and filed before January 1, 2016 and
 - immunization records with dates for all required shots not exempted, or
- Is entering 1st-6th grade or 8th-12th grade and submits a valid PBE filed at a prior California school for missing shot(s) and immunization records with dates for all required shots not exempted. The PBE must have been filed before January 1, 2016 and is only valid for the current grade span (TK/K through 6th or 7th through 12th grade). For complete details, visit ShotsforSchool.org, or
- Submits a licensed physician's written statement of a permanent medical exemption for missing shot(s) and immunization
 records with dates for all required shots not exempted.

The immunization requirements do not prohibit pupils from accessing special education and related services required by their individualized education programs.

A CHILD WHO IS MISSING REQUIRED SHOTS MAY BE ADMITTED CONDITIONALLY IF HE/SHE:

- Is missing a dose(s) in a series, but the next dose is not due yet. This means the child has received at least one dose in a series and the deadline for the next dose has **not** passed, according to the table below.
- Has a temporary medical exemption to certain vaccine(s) and has submitted immunization records for vaccines not exempted. The statement must indicate which immunization(s) must be postponed and when the child can be immunized.

SCHOOLS NEED TO FOLLOW UP AFTER ADMISSION IF:

- Child was admitted conditionally. Notify parents of the deadline for missing doses. Review records every 30 days until all required doses are received.
- Awaiting records for transfers from within California or another state. School may allow up to 30 school days before exclusion.

Vaccine	Age (Years)	Missing Dose	Earliest Date After Previous Dose	Deadline After Previous Dose
Polio		2nd	6 weeks	10 weeks
		3rd	6 weeks	12 months
	4–6	4th	If the 3rd dose was given dose is required before a	before the 4th birthday, one more dmission.
	7–17	4th	If the 3rd dose was given dose is required before a	before the 2nd birthday, one more dmission.
DTaP, DTP, or DT	Under 7	2nd or 3rd	4 weeks	8 weeks
		4th	6 months	12 months
		5th	If the 4th dose was given before the 4th birthday, one dose is required before admission.	
DTaP, DTP, DT,	7 & Older	2nd	4 weeks	8 weeks
Tdap, or Td		3rd	6 months	12 months
		4th	If the 3rd dose was given dose is required before a	before the 2nd birthday, one more dmission.
MMR		2nd	1 month	3 months
Нер В	4–6	2nd	1 month	2 months
		3rd	2 months after 2nd dose and at least 4 months after 1st dose	6 months after 2nd dose
Varicella	13–17	2nd	4 weeks	3 months

When Missing Doses Can Be Given:

DO NOT ADMIT A CHILD WHO:

Does not fit one of the previous categories. Refer parents to their physician with a written notice indicating which doses are needed.

Maintain a list of unimmunized children (exempted or admitted conditionally), so they can be excluded quickly if an outbreak occurs.

NAME OF STUDENT		
PARENTS' NAMES		
		PHONE:
MEDICAL HISTORY: PLEASE CHEC	K ANY OF THE FOLLOWING YOUR CHIL	D HAS OR HAS HAD:
Diabetes	Polio	Whooping Cough
Epilepsy	Pneumonia	Measles (regular - 10 day)
Heart Disease	Chicken Pox	Rheumatic Fever
German Measles (3 day)	Mumps	Scarlet Fever
Tuberculosis	Tuberculosis Contact	Asthma
Allergies – (Please explain):		
Surgeries or other serious restrictions: Have any special recommendations be		the school life of this child?
Has he/she ever worn glasses?	Does he/she	e at this time?
Has he/she ever had any hearing loss?	If so, please explain	
Are there any physical conditions requ	iring special attention? If so, please exp	olain:
Is your child on any special medication	s? (Please list medications and reasons	s needed.)
	.	
Does your child have any needs or con	cerns that Woodland Christian School	should know about?

Agency
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REPORT OF HEALTH EXAMINATION FOR SCHOOL ENTRY

The To protect the health of children, California law requires a health examination on school entry. Please have this report filled out by a health examiner and return it to the school. school will keep and maintain it as confidential information.

CHILD'S NAME-Last	TO BE FILLED OUT BY A PARENT OR GUARDIAN NAME—Last	T OR GUARDIAN	Middle		BIRTH DATE-Month/Day/Year
ADDRESS-Number, Street	mber, Street	City	ZIP code	SCHOOL	
				í.	

TO BE FILLED OUT BY HEALTH EXAMINER **PART II**

HEALTH EXAMINATION

Health History / Physical Examination / Dental Assessment / Dental Assessment / Nutritional Assessment / Nutritional Assessment / Nutritional Assessment / Developmental Assessment / Usion Screening / Audiometric (hearing) Screening / Iuberculin Test (Mantoux/PPD) / Unine Test / Blood Lead Test /	REQUIRED TESTS/EVALUATIONS	DATE (mm/dd/yy)
Physical Examination / Dental Assessment / Nutritional Assessment / Nutritional Assessment / Developmental Assessment / Vision Screening / Vision Screening / Nutrice (hearing) Screening / Inberculin Test (Mantoux/PPD) / Blood Test (for anemia) / Urine Test /	Health History	1 1
Dental Assessment / Nutritional Assessment / Developmental Assessment / Developmental Assessment / Vision Screening / Vision Screening / Unionetric (hearing) Screening / Blood Test (for anemia) / Urine Test / Blood Lead Test /	Physical Examination	-//
Nutritional Assessment / Developmental Assessment / Developmental Assessment / Vision Screening / Vision Screening / Audiometric (hearing) Screening / Inberculin Test (Mantoux/PPD) / Blood Test (for anemia) / Urine Test / Blood Lead Test /	Dental Assessment	
Developmental Assessment / Vision Screening / Audiometric (hearing) Screening / Audiometric (hearing) Screening / Blood Test (for anemia) / Urine Test / Blood Lead Test /	Nutritional Assessment	
Vision Screening // Audiometric (hearing) Screening // Tuberculin Test (Mantoux/PPD) // Blood Test (for anemia) // Urine Test // Blood Lead Test //	Developmental Assessment	-11
Audiometric (hearing) Screening // Tuberculin Test (Mantoux/PPD) // Blood Test (for anemia) // Urine Test // Blood Lead Test //	Vision Screening	1 1
Tuberculin Test (Mantoux/PPD) / Blood Test (for anemia) / Urine Test / Blood Lead Test /	Audiometric (hearing) Screening	1//
Blood Test (for anemia) // // // // // // // // // // // // //	Tuberculin Test (Mantoux/PPD)	-11
Urine Test / / ////////////////////////////////	Blood Test (for anemia)	
Blood Lead Test	Urine Test	-11
Other	Blood Lead Test	-11
	Other	1/

IMMUNIZATION RECORD

Note to Examiner: Please give the family a completed or updated yellow California Immunization Record. Note to School: Please record immunization dates on the blue California School Immunization Record (PM 286)

I

		DATEEAC	DATE EACH DOSE WAS GIVEN	AS GIVEN	100 - 200 - 20 - 20 - 20 - 20 - 20 - 20
VACCINE	First	Second	Third	Fourth	Fifth
OPLO (OPV or IPV)					
DtaP/DTP/DT/Td (diphtheria, tetanus, and [acellular] Dertussis) OR (tetanus and diphtheria only)					
MMR (measles, mumps, and rubella)					
HIB MENINGITIS (Haemophilus Influenzae B) Required for child care/preschool only)					
HEPATITIS B					
VARICELLA (Chickenpox)					
DTHER					
OTHER					

PART III	PART III ADDITIONAL INFORMATION FROM HEALTH EXAMINER (optional)	and	RELEASE OF HEALTH INFORMATION BY PARENT OR GUARDIAN
RESULTS AI	RESULTS AND RECOMMENDATIONS	L gi che	I give permission for the health examiner to share the additional information about the health check-up with the school as explained in Part III.
Fill out if patie	Fill out if patient or guardian has signed the release of health information.		□ Please check this box if you <i>do not</i> want the health examiner to fill out Part III.

Examination shows no condition of concern to school program activities.

Conditions found in the examination or after further evaluation that are of importance to schooling or

physical activity are: (please explain)

Signature of parent or guardian

Date

Name, address, and telephone number of health examiner

Signature of health examiner

Date

PM 171 A (09/07) (Bilingual)

If your child is unable to get the school health check-up, call the Child Health and Disability Prevention (CHDP) Program in your local health department. If you do not want your child to have a health check-up, you may sign the waiver form (PM 171 B) found at your child's school. CHDP website: www.dhcs.ca.gov/services/chdp

NOTE: All tests and evaluations except the blood lead test must be done after the child is 4 years and 3 months of age.