

Health Office - Mesivta Ateres Yaakov
131 Washington Avenue Lawrence, N.Y. 11559
Phone: 516-374-6465 FAX: 516-374-1834



August, 2020

Dear Parent/Guardian,

In preparation for the new school year beginning September 2018, the necessary documents that must be returned to the health office are being emailed to you. The six forms are listed below with explanations of the New York State requirements. Please print out **ONLY** the ones that are pertinent to your child(ren) and complete them. We appreciate your cooperation in returning these forms to the health office **BEFORE** the school year begins in September. Please note that these forms are state mandated and are due on the first day of class. In addition, there are state deadlines by which time all student immunization records must be submitted. Forms can be sent via E-Mail Email to healthoffice@ateresyaakov.com

New York State Public Health Law, Section 2164 requires that schools will not permit a child to attend school **unless** the parent provides the school with a certificate of immunization or proof from a physician, nurse practitioner or physician's assistant that the child is in the process of receiving the required immunizations.

Important: On 6/13/19, NYS eliminated the religious exemption from vaccinations for school attendance. Information is available on the NYS Department of Health website at:
<https://www.health.ny.gov/prevention/immunization/schools/>.

1. Health Appraisal Form (Please note: This form is four (4) pages) - Must be submitted for:
 - Any new entering student
 - Any student entering grade 9
 - Any student entering grade 11

A doctor's computerized form may be submitted instead of the form, as long as it includes the physical exam information along with the immunization record. If your son will be trying out for a sports team, please make sure the sports portion is properly filled in.

2. Medication Administration Form- **ONLY** to be filled out if you are supplying a medication for your child. If your child is to receive any medication in school, prescription or over the counter, it must be brought in from home in its original labeled container. The medication administration form must be completed and signed by **BOTH** the doctor and a parent. This includes any daily medication, Tylenol or Advil, EpiPens, Benadryl, Hydrocortizone cream, rescue inhalers, or any other "as needed" medication.

3. Self-Medication Release Form- To be filled out ONLY if you want your child to keep his medication on him instead of in the health office. This form may only be used for children TEN YEARS OLD OR OLDER, and both you and your doctor must be confident that your child is knowledgeable about his medication and capable of self-administration. As such, please note that this form is to be signed by both the doctor and a parent. If you opt to complete this Self-Medication Release form, it is to be filled out IN ADDITION TO THE MEDICATION ADMINISTRATION FORM.
4. Emergency Allergy Action Plan – Must be completed if your child suffers from a FOOD, STING, LATEX, or any other allergy requiring EMERGENCY MEDICATION. The Doctor and the Parent must fill this form! A parent must also sign it.
5. Emergency Asthma Action Plan- Please have your doctor complete if your child has asthma and you will be providing an inhaler or other emergency medication to have on hand for him in the health office. A parent must also sign it.
6. Dental Form- This form is optional.

If you have any questions or would like to discuss anything with me privately please call the health office.

Thank you,

Phone : 516-374-6465