

CHILD'S NAME (PRINTED)

Dear Parents,

According to state law the following admission requirements must be completed and on file at the school BEFORE the child can begin the program.

1. Health Care Professional's Statement

Your child needs an <u>annual</u> doctor's note on file in order to attend a licensed child care program. The doctor will check **one** of the options below.

- o I have examined the above-named child within the past year and find that he/she is able to participate in the child-care program.
- o A signed and dated copy of a Health Care Professional's Statement is attached.

Health Care Professional Printed Name	Health Care Professional Signature		 Date	
2. Hearing/Vision Assess	ment			
If the child is entering Pre-K hearing test. Please have your own office form for the testing. EYE TEST				
PASSFAILHEARING TEST	Right Eye ₋	Left E	Eye	000
	1000HZ 2 1000HZ 2			
Health Care Professional Si	gnature	-	Date	_