



HEALTH SERVICES & PROGRAMS

POMONA UNIFIED SCHOOL DISTRICT

800 S Garey Avenue, P.O. Box 2900, Pomona, California 91766 Phone: (909) 397-4648 ext. 28352

PHYSICAL EXAM FOLLOW-UP NOTIFICATION

Date: _____

Student: _____

Teacher: _____

Dear Parent:

Our records indicate that your child has not yet had his/her physical examination that is required by the State of California for all first graders.

The attached certificate must be completed by your doctor and returned to the school nurse before

_____.

If we do not receive this certificate or other written documentation that your child has had a physical examination, your child may be excluded from school.

If you have any questions or need assistance, contact your school nurse or health services assistant.

Thank you for your cooperation.

School Nurse

397-_____

Days available

Attachment