

# HEALTH REQUIREMENTS FOR KINDERGARTEN ENTRY

## 1. PHYSICAL EXAMINATION

- Completed within one year of entry into Kindergarten and on the Department of Human Services (DHS) examination form.
- Health History portion at the top of the form must be completed, signed and dated by parent/guardian.
- Incomplete examination forms will not be accepted and will be returned.
- Keep a copy for your records.

## 2. IMMUNIZATIONS: All as required by the Illinois Department of Public Health including:

- **Poliomyelitis (Polio):** Four or more doses at the appropriate intervals with the last dose received on or after the 4th birthday & 6 months or greater since the last dose.
- **Diphtheria, Tetanus, Pertussis (DTaP):** Four or more doses at the appropriate intervals, with the last dose being received on or after the 4th birthday.
- **Measles, Mumps, Rubella (MMR):** Two doses of MMR Vaccine, the first being on or after 12 months of age and the second dose no less than 1 month after the first.
- **Varicella (Chickenpox):** Two doses on or after 12 months of age or older, and the second dose no less than 1 month after the first or verified history of the disease by physician.

## 3. DENTAL EXAMINATION

- Due by May 15th of 22-23 school year

## 4. EYE EXAMINATION

- Due by October 15th of the 22-23 school year

Parents/guardians who object to examination(s) or immunization(s) on religious grounds must complete and submit the Illinois Certificate of Religious Exemption form. This form must be completed in its entirety by the parent/guardian and signed by the physician, advanced practice nurse or physician assistant performing the exam. The statement must set forth the specific religious belief that conflicts with the examination(s) and/or immunization(s). Each vaccine that is objected, must be listed. The form is available on the Illinois Dept of Public Health website at [www.dph.illinois.gov](http://www.dph.illinois.gov) search "religious exemption."

## 5. SPECIFIC HEALTH FORMS: If applicable, the following forms need to be completed and signed by your physician yearly:

- Medication Authorization request forms
- Allergy Action Plans and/or Asthma Action Plans
- Diabetes Medical Plans
- Seizure Action Plans
- These forms can be found on the District website under "Health Services" or they can be provided by the School Nurse or your physician/specialist