To: **Parent/Guardian**

From: **Private School Principal**

Re: **Nursing Services; Chapter 226 – Laws of 1991**

Existing legislation provides certain nursing services and funding for full time students in private schools. Included in these services, based on available state aid, is maintenance of student health records, hearing assessment, and scoliosis screening. In addition, your child will receive emergency nursing services for any school related illness or injury.

Please sign the form below and return it to the YHIS nurse's office as soon as possible.

NONPUBLIC NURSING SERVICES

_____ I do give my permission **_____ I do NOT give permission**

_____ Not Applicable (Nursery, Pre-S, Pre-K student)

For my child _____, in grade _____ to participate in nursing services.

School District: Franklin Township, New Jersey

School: YINGHUA INTERNATIONAL SCHOOL, 25 LAUREL AVENUE, KINGSTON, NJ 08528/75 Mapleton Avenue, Princeton, NJ 08540

I give YINGHUA INTERNATIONAL SCHOOL nurse permission to share medical information with staff involved in my child's care.

Has there been any changes to your child's medical status, including new allergies, since the last school year?

NO YES, Please describe _____

_____

Any international travel during the summer of 2023? _____ Countries: _____

Date of Visit: from _____ to _____ (back in New Jersey)

Parent Signature: _____ Date: _____

Please be advised that if your child requires medicine in school, he/she must have a doctor's note, as well as a parent's consent (as per protocol). This includes over the counter medication. If your child needs to be excused from physical education, a note from the doctor indicating the reason and period of exclusion will be required. We look forward to a healthy school year. Please feel free to call us any time.

YHIS School Nurse