



HAMILTON TOWNSHIP SCHOOL DISTRICT

DEPARTMENT OF STUDENT SERVICES AND PROGRAMS

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Website: www.htsdnj.org

Marta Audino

Director of Student Services and Programs

Date: _____

To the Parents/Guardians of: _____

I have been advised by the school nurse that your child is **not** in compliance with one of the following requirements mandated by the New Jersey Sanitation Code (N.J.S.C) and the New Jersey Administrative Code (N.J.A.C.).

_____ **Complete** Immunization Records pursuant to N.J.A.C. 8:57-4.1 through 4:20

Immunizations required: _____

_____ Enrollment entry physical examination by a physician or their designee (PA, NP)

Parents or guardians are required to provide **within 30 days of enrollment**, documentation of a physical exam for each student.

Please be advised that your child will be excluded from school until the above requirements have been documented. You can provide physician documentation that the immunizations and or physical exam has been completed, or that an appointment has been made to receive the immunizations or physical exam. The appointment must be a physician appointment card or a note from the physician of the said appointment.

If you are uninsured or if your insurance does not cover immunization services, you can contact the Hamilton Township Division of Health for free immunizations. Please notify your school nurse of the appointment date.

Hamilton Township Division of Health
2100 Greenwood Avenue
Hamilton, NJ 08690
609.890.3884

If you are in need of a physical exam for your child, please contact **your** school nurse for further instructions as to where you can get an exam for free.

Your child will be excluded from school on _____ . Please provide documentation of the requirements or an appointment card as soon as possible.

Thank you for your attention in this matter.

Sincerely,

Marta Audino

Marta Audino, MAT, M.Ed.
Director of Student Services and Programs