



**2019-2020**

**HEALTH STATEMENT and IMMUNIZATIONS**

**HEALTH STATEMENT REQUIREMENT**

Health status information is critical to ensuring that the individual needs of children are met, while protecting the health and safety of all children in care. The Texas Department of Family and Protective Services requires a written statement from a physician indicating the child had a complete physical exam within the past 12 months and is able to take part in the school program at Day One Christian Academy.

\_\_\_\_\_ (Please print child's name), is free from contagious and communicable disease and is physically able to participate in the school program.

Date of last physical exam \_\_\_\_\_ Child's birth date \_\_\_\_\_

Physician's Signature \_\_\_\_\_ Date \_\_\_\_\_

**This form must be completed prior to attendance in the program.**

