

## **NIPPERSINK DISTRICT 2**

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Dear Parent or Guardian:

Pursuant to the State of Illinois, all children entering school are required to provide the following documentation prior to starting school. Per School Board policy, **your child will be excluded if the necessary forms are not received by the designated deadline.**

**ALL STUDENTS TRANSFERRING FROM OUT OF STATE or ENTERING AN ILLINOIS SCHOOL FOR THE FIRST TIME** must provide an updated physical exam and proof of immunizations on a State of Illinois school physical form. Additionally, a vision exam from a licensed eye doctor is required. **IMMUNIZATIONS MUST BE RECEIVED PRIOR TO STARTING THE FIRST DAY.** If you have any questions, need any assistance financially or with attaining resources, please do not hesitate to contact your school nurse.

**STUDENTS TRANSFERRING FROM OTHER SCHOOLS WITHIN ILLINOIS**  
MUST PRESENT PROOF OF IMMUNIZATIONS PRIOR TO THE FIRST DAY.

### **The following is required for incoming PRE-K students:**

- 1) **A PHYSICAL EXAM AND IMMUNIZATIONS** performed within one year of the start of the school year, including up-to-date immunizations in accordance with State Law. The diabetic screening and lead screening portion of the form must be completed by the provider signing the form. **Parents must also complete and sign the health history portion located on the back of the form.**

### **The following are required for incoming KINDERGARTEN students:**

- 1) **A PHYSICAL EXAM** performed within one year of the start of the school year, including up-to-date immunizations in accordance with State Law. The diabetic screening and lead screening portion of the form must be completed by the provider signing the form. **Parents must also complete and sign the health history portion located on the back of the form.**
- 2) **IMMUNIZATIONS** must include 5 doses of **DTAP** (with the last after the 4th birthday), 4 doses of **IPV** (with the last after the 4th birthday), 2 doses of **MMR** and **Varicella**, and a completed 3 dose series of **Hepatitis B**.
- 3) **A VISION EXAM** performed within one year of the start of the school year completed by a licensed eye doctor.
- 4) **A DENTAL EXAM** performed by a licensed dentist

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### **The following is required for students entering SECOND GRADE**

- 1) **DENTAL EXAMINATION** performed by a licensed dentist

### **The following are required for students entering SIXTH GRADE:**

- 1) **A PHYSICAL EXAM** within one year of the start of the school year which includes up-to-date immunizations in accordance with state law. The diabetic screening portion of the form must be completed by the provider in order to consider the form complete. Also, a **parent or guardian must complete and sign the health history portion located on the back of the form.**
- 2) **IMMUNIZATIONS** which are required include all vaccines necessary for elementary school, as well as the completion of the **HEPATITIS B** series and proof of having received one dose of **TDAP** and **MENINGOCOCCAL** vaccines on or after the student's 11th birthday.
- 3) **DENTAL EXAM** performed by a licensed dentist.

\*\*\*These forms are all available on the district website [nippersinkdistrict2.org](http://nippersinkdistrict2.org) under "Health Services"

\*\*\* Upon completion, please forward the forms to your school nurse and keep a copy of your child's immunization record for your own future reference. If you have questions, need assistance financially or with attaining resources, please do not hesitate to contact your school nurse. Thank you in advance for your cooperation.

4/2/2024