



# Washington Township Schools

~ A Community of 21st-Century Learners ~

WWW.WTSCHOOLS.ORG



Dear \_\_\_\_\_ :

I am pleased to welcome you to our school system as a new resident; we hope that if you have any questions concerning your child's transfer or adjustment to our district you will feel free to call upon me or your school principal.

New Jersey school regulations require all public school students to have immunizations.

To date, we have not received proof that the following immunizations have been given to your child:

Child's Name: \_\_\_\_\_

- |       |     |                    |
|-------|-----|--------------------|
| _____ | 1.  | DPT SERIES         |
| _____ | 2.  | POLIO              |
| _____ | 3.  | MEASLES            |
| _____ | 4.  | RUBELLA            |
| _____ | 5.  | MUMPS              |
| _____ | 6.  | VARICELLA          |
| _____ | 7.  | HEPATITIS B SERIES |
| _____ | 8.  | HIB                |
| _____ | 9.  | TdaP               |
| _____ | 10. | MENINGOCOCCAL      |

If you have any questions regarding the full series of immunizations required, please contact your school nurse, and she will be happy to help you.

Please see that the above items are provided to your school nurse within the next two weeks.

Thank you for your cooperation.

Sincerely,

Jeffrey S. Mohre

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