## KINDERGARTEN REGISTRATION CHECKLIST:

All of the forms listed below can be printed from the website.



IMMUNIZATIONS (including LEAD screening)

\*\*Due at registration - MUST HAVE BY first day of school!!



## 3 PAGE HEALTH HISTORY FORM

\*\*Complete and bring to Kindergarten Screening

\*\*Sign up for nurse interview or contact school nurse if your child has

health issues including severe allergy, asthma, seizures, etc.



PHYSICAL EXAM FORM

\*\*Completed and signed by physician



DENTAL EXAM FORM

\*\*Completed and signed by dentist



MEDICATION/TREATMENT CARD FORM

\* Physical and dental forms should be dated within 1 year of the start of the school year

\*\*\*As always, please feel free to contact the school nurse with any questions and/or concerns that you may have at:

Clairton City School District

**Health Services** 

Cequcoria Hammonds, RN, BSN

Phone: 412-233-9200 x 1124

Fax: 412-233-4590