

FRESHMAN CLASS OF 2024

HEALTH REQUIREMENTS CHECKLIST

Check when Complete	Event	Timeline
	MANDATORY	
	<p style="text-align: center;">1. Pink Emergency Information Sheet (attached)</p> <p style="text-align: center;">This form should be completed and turned in at your registration.</p>	February, 1, 2020
	<p style="text-align: center;">2. Certificate of Child Health Exam (attached)</p> <p><i>State of Illinois form must be completed and signed by a licensed physician, APN, or PA. Note: Obtaining a copy of your child's 6th grade physical may help your physician complete the immunization section of this form.</i></p> <p>Form MUST show the following immunizations:</p> <ul style="list-style-type: none"> ● Tetanus Diphtheria, Pertussis series with Tdap booster ● Two (2) doses of measles, mumps, rubella vaccine (MMR) – 1st dose having been given on or after the 1st birthday ● Polio vaccine series with booster given on or after the 4th birthday ● Two (2) doses of varicella vaccine (the 1st dose having been given on or after the 1st birthday) ● Three (3) doses of Hepatitis B according to the required schedule ● One dose of Meningococcal vaccine on or after 11th birthday for freshman <p>***Parents/Guardians must complete the Health History portion on the back page prior to submitting form</p> <p>***Freshman physicals dated after 5/1/2020 will satisfy the sports physical athletic department requirement for the 2020-2021 school year. ***Athletes will need a separate sports physical completed if freshman physical is dated prior to 5/1/20 and those should be sent directly to the athletic office.</p>	On or Before May 15, 2020
	3. Dental Examination (attached)	ASAP
	OPTIONAL	
	<p style="text-align: center;">MEDICATION AUTHORIZATION FORM (attached)</p> <p style="text-align: center;">(Required for daily and as needed medications administered at school)</p>	If applicable
	<p style="text-align: center;">ASTHMA ACTION PLAN (online)</p> <p style="text-align: center;">(Required from physician for all students with Asthma)</p>	If applicable
	<p style="text-align: center;">ALLERGY AND ANAPHYLAXIS PLAN (online)</p> <p style="text-align: center;">(Required for students who need Epinephrine/Benadryl)</p>	If applicable
	<p style="text-align: center;">SEIZURE ACTION PLAN (online)</p> <p style="text-align: center;">(Required from physician for all students with Seizures/Epilepsy)</p>	If applicable
	<p style="text-align: center;">STATE OF ILLINOIS EYE EXAMINATION REPORT or WAIVER (online)</p> <p style="text-align: center;">(Required for students entering the Illinois School System for the first time)</p>	If applicable
	<p>Completed forms should be submitted in ONE of the following ways</p> <p>Delivered/Mailed to Carl Sandburg High School, 13300 South LaGrange Road, Orland Park, IL, 60462, Attention: Nurse's Office,</p> <p>FAX to 708-737-7721, EMAIL to csnurse@d230.org, OR</p> <p>ONLINE submission to Laserfiche https://lf.d230.org/Forms/Medical</p>	As soon as complete

Orland Township (708-403-4222) provides immunization clinics and physical examinations.

Palos residents can contact Palos Township Clinic for similar services at 708-598-2441.

All forms are available at <https://www.d230.org/Page/1315>

Contact the Nurse's Office at csnurse@d230.org with any questions.