

## IMMUNIZATION POLICY ACKNOWLEDGMENT

## THE ROMAN CATHOLIC ARCHDIOCESE OF WASHINGTON – CATHOLIC SCHOOLS (DC)

ALL PARENTS OF STUDENTS ATTENDING ARCHDIOCESAN CATHOLIC SCHOOLS IN THE DISTRICT OF COLUMBIA MUST <u>READ</u> THIS FORM, <u>SIGN</u> BELOW, AND <u>RETURN</u> IT TO YOUR CHILD'S SCHOOL WITH THE DISTRICT OF COLUMBIA UNIVERSAL HEALTH CERTIFICATE.

To All Parents of Students in Archdiocesan Catholic Schools in the District of Columbia

It is the policy of the Roman Catholic Archdiocese of Washington that all students attending schools in the archdiocese must be fully immunized in accordance with immunization requirements against contagious diseases published by the local department of health. Exemptions are provided on a temporary basis for those applicants with a physician-documented medical reason.

Immunization in accordance with the Roman Catholic Archdiocese of Washington's policy is a condition for admission into all archdiocesan Catholic schools. To be admitted to attend classes, there must be two forms related to immunization on file at your child's school by the first day of school, and they are:

- 1. THIS FORM, completed and signed; and
- 2. DC Universal Health Certificate, signed by a medical provider and parents (Pages 2 and 3).

		Acknowledgment		To be filled out by parent or guardian		
To All Parents/Guardians: Please provide the following information and sign below to acknowledge that you understand and agree to this policy.						
Child's Name:	Last		First		M.I.	(Jr., III)
School:		Sex:	 Male	 Female	Date of Birth	:
Parent/Guardian Name:			Home Phone:		Phone:	
	Street Address				Suite #	
_	City		St	tate	ZIP Code	
I have read and understand the Roman Catholic Archdiocese of Washington's Immunization policy listed above:						
Parent/Guardian Signature:					Date:	
	~. ~	ase Sign				
To Parents of Rising 6th Grade Students Only:						
Do NOT complete these forms but request Form 5 from the school's principal.						