Welcome, we are excited for your child to join Provo City School District! The following will provide you with information regarding the registration of your incoming Kindergarten student. Children who will be 5 years old ON OR BEFORE SEPTEMBER 1, 2015 are eligible for enrollment.

You may fill out forms online at FORMS.PROVO.EDU. Please bring the following documents to the school on the dates given:

- Child’s birth certificate
- Child’s immunization records – including dates of all shots, or exception certificates. Children may register but cannot attend school until immunizations are up to date and a copy of the record has been turned into the school. Please see the attached immunization letter for more detailed information.
- Proof of address (example: utility bill or rental agreement)

For registration to be complete both the online information and the above named items must be received by the school.

If you do not have access to the Internet you may register at the schools on the given dates, or any place you can access the Internet. This process should take approximately 20-30 minutes. For further information please contact the school your child will be attending. If you know of families with kindergarten-age children who will be attending school next year, please share this information with them.

The Utah State Office of Education together with the Utah Family Center and the Office of Child Care developed a pamphlet to support your child’s learning before entering Kindergarten. The pamphlet is available in English and Spanish at the following web address or for paper copy contact your boundary school. http://www.schools.utah.gov/CURR/preschoolkindergarten/Kindergarten-Readiness.aspx

Provo City School District is interested in alleviating any unnecessary stress to individuals with disabilities. When students with disabilities are beginning school for the first time in a Provo school, they and their parents are encouraged to visit the school to identify barriers, which may require adaptations to accommodate their needs. To expedite any such accommodations, early contact with the Principal will be helpful.

Kindergarten Orientation Dates & Times by School:

Kindergarten-age children are NOT required to attend this meeting unless otherwise specified by your school.

<table>
<thead>
<tr>
<th>School</th>
<th>Phone</th>
<th>Date</th>
<th>Day</th>
<th>Time</th>
<th>Place</th>
</tr>
</thead>
<tbody>
<tr>
<td>*Amelia Earhart</td>
<td>374.4630</td>
<td>3/24</td>
<td>Tues</td>
<td>9:00-2:30 clinic 1-3</td>
<td>Media Center</td>
</tr>
<tr>
<td>**Canyon Crest</td>
<td>221.9873</td>
<td>3/27</td>
<td>Fri</td>
<td>2:00-4:00</td>
<td>GYM</td>
</tr>
<tr>
<td>**Edgemont</td>
<td>221.9984</td>
<td>4/17</td>
<td>Fri</td>
<td>1:45-2:45/3:00-4:00</td>
<td>Media Center</td>
</tr>
<tr>
<td>*Franklin</td>
<td>374.4925</td>
<td>4/24</td>
<td>Fri</td>
<td>1:45-3:30</td>
<td>Media Center</td>
</tr>
<tr>
<td>Lakeview</td>
<td>374.4990</td>
<td>4/17</td>
<td>Wed</td>
<td>3:15-4:30</td>
<td>GYM</td>
</tr>
<tr>
<td>Provo Peaks</td>
<td>374.4940</td>
<td>4/17</td>
<td>Fri</td>
<td>1:30-4:00</td>
<td>GYM</td>
</tr>
<tr>
<td>Provopeast</td>
<td>374.4960</td>
<td>2/26&amp;27</td>
<td>Thurs/Fri</td>
<td>2:00-4:00</td>
<td>Conference Room</td>
</tr>
<tr>
<td>Rock Canyon</td>
<td>374.4935</td>
<td>3/27</td>
<td>Fri</td>
<td>1:40-3:30</td>
<td>Media Center</td>
</tr>
<tr>
<td>Spring Creek</td>
<td>370.4650</td>
<td>3/20</td>
<td>Fri</td>
<td>2:00-4:00 open house</td>
<td>GYM</td>
</tr>
<tr>
<td>*Sunset View</td>
<td>374.4950</td>
<td>3/18</td>
<td>Wed</td>
<td>1:00-5:00 open house</td>
<td>Library</td>
</tr>
<tr>
<td>Timpanogos</td>
<td>374.4955</td>
<td>3/26</td>
<td>Thurs</td>
<td>3:30-5:30</td>
<td>Library</td>
</tr>
<tr>
<td>Wasatch</td>
<td>374.4910</td>
<td>4/3</td>
<td>Fri</td>
<td>2:00-4:00</td>
<td>Library</td>
</tr>
<tr>
<td>Westridge</td>
<td>374.4870</td>
<td>4/17</td>
<td>Fri</td>
<td>1:45-3:30</td>
<td>Library</td>
</tr>
</tbody>
</table>

* The Health Department will be available for immunizations if needed

** Please bring child with you for an initial assessment
January 2015

Dear Parents/Guardians:

Utah State Law requires that all children who are entering school for the first time be protected against Diphtheria, Tetanus, Whooping Cough, Polio, Measles, Mumps, Rubella, Hepatitis B, Varicella (chickenpox), and Hepatitis A. Beginning with the 2015-2016 school year, there will be a requirement of 2 Varicella (chickenpox) shots or prior history of the disease for kindergarten and 7th grade entry. In addition 7th grade students will also be required to show proof of one meningococcal shot.

Please contact your family physician regarding these immunizations or obtain them by attending the IMMUNIZATION CLINICS conducted by the health department on

- Monday, Tuesday and Friday  8:00 am – 4:30 pm,
- Wednesday  8:00 am – 7:00 pm, and
- Thursday  9:00 am – 4:30 pm.

The Health Department is located at 151 S University Ave. Provo, Utah. No one will be denied required childhood immunization for inability to pay at the Health Department. For detailed information on immunizations clinics, call the Utah County Health Department at 801.851.7025 or visit their website at www.utahcountyhealth.org or www.immunize-utah.org.

As per State Law, no child may attend school until the immunizations are completed and the records have been reported to the school. Parents/Guardians who wish to claim a personal exemption for their child/student must visit their local Health Department to complete and sign the “Personal Exemption Form” and pay a required fee of $25.00 per student.

We also recommend that students entering kindergarten, and all new students who are entering Provo schools for the first time, receive a complete physical and receive all required immunizations. Although exams are not mandatory, they are encouraged as a means of assisting parents and teacher to remain well informed about the child’s physical well being.

If your student has any medical condition that needs attention during school time, please contact the school nurse.

We want to provide the best learning opportunities for your children and appreciate your support at home. If you have questions about the enrollment process you may call Student Services Office at 801.374.4838.

Sincerely,

Gary Wilson
Executive Director of Student Services
Provo City School District
Immunization Requirements
Kindergarten Entry 2015-2016

To attend kindergarten, a student must have written proof of receiving the following immunizations:

- 5 DTaP/DT
- 4 Polio* (3 doses, if 3rd dose was given on/after the 4th birthday)
- 2 Measles, Mumps, Rubella
- 3 Hepatitis B
- 2 Hepatitis A
- 2 Varicella **(chickenpox) – history of disease is acceptable; a parent must sign the verification statement on the school immunization record.

* The final dose of polio vaccine administered ON or AFTER August 7, 2009 must be given at a minimum age of 4 years AND a minimum interval of 6 months following the previous dose. The final dose of polio administered PRIOR to August 7, 2009 will fall under the previous recommendation with a minimum interval of 4 weeks between doses.

**Effective December 5, 2014, students entering Kindergarten must have two doses of Varicella (chickenpox) vaccine.

A child may be allowed to attend school “conditionally” if at least one dose of each required immunization has been completed and the child is currently on schedule to receive the remaining immunizations. The remaining immunizations must be completed on schedule for the child to remain in attendance.

For children whose parents claim an exemption to immunization for medical, religious, or personal reasons, an appropriate Utah Department of Health Exemption form must be completed and presented to the child’s school and a copy kept in their cumulative file.

For questions regarding your child’s immunization status, contact your child’s health care provider, your local health department or the Immunization Hotline at 1-800-275-0659.
TO PARENTS OR GUARDIAN: Medical examinations are recommended for kindergarten, fourth- and seventh-grade students before entering school. Parents should complete the first four lines, and then take the form to the family physician. This form should be returned to the school by the time school starts.

<table>
<thead>
<tr>
<th>School Year</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>Parent</td>
</tr>
<tr>
<td>Address</td>
<td>Telephone</td>
</tr>
<tr>
<td>School</td>
<td>Date of Birth</td>
</tr>
</tbody>
</table>

If this child has a specific health problem, please indicate: 

HEIGHT: ___FT ___IN WEIGHT: ___LBS ___OZ  VISION: Right Eye___ Left Eye___ Glasses:___  
HCT/HGB: _________ URINALYSIS: _________ BLOOD PRESSURE (optional): _________

HISTORY

Allergies: _______________ Seizures: _______________ Diabetes: ____________________
Rheumatic Fever: _______________ Heart Condition: _______________ Kidney Disease: _______________
Other severe illness, disabilities, or physical defects (explain): _______________

PHYSICAL EXAM

Eyes: _______ Ears: _______ Nose: _______ Throat: _______ Dental: _______
Thyroid: _______________ Lungs: _______________ Heart: _______________ Abdomen: _______________
Extremities: _______________ Additional Findings: _______________

Is this child taking medication? ___ Regularly? ___ PRN? _______________
Type of Medication: _______________ Dosage: _______________

List any restrictions of activity: _______________

Recommendations:

<table>
<thead>
<tr>
<th>DATES OF IMMUNIZATIONS (Month/Day/Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>DTP, DT or DTaP</td>
</tr>
<tr>
<td>POLIO</td>
</tr>
<tr>
<td>HIB</td>
</tr>
<tr>
<td>MMR</td>
</tr>
</tbody>
</table>

TUBERCULIN TEST

DATE: ___________ TYPE: ___________ REACTION: ___________  

DATE: ___________________ \ SIGNATURE OF PHYSICIAN: ___________________