## Terrill Middle School 1301 Terrill Road Scotch Plains, NJ 07076

**PHONE: (908) 322-5215** Dr. Kevin Holloway *Principal*  FAX: (908) 322-6813 Mr. Ralph Gerace Assistant Principal

Dear Parent/Guardian:

Effective September 2008, the Department of Health and Senior Services of the State of New Jersey required that children born after January 1, 1997, and enrolled in **grade six** or transferring into a New Jersey school from another state or country will be required to receive a booster dose of the diphtheria, tetanus and pertussis vaccine (Tdap) as well as one dose of meningococcal vaccine.

These immunizations are generally administered during the 11-year-old physical visit. Your physician may complete the bottom portion of this form or sign/stamp the computer-generated immunization record you receive at the office. <u>Please submit either form to the school's health office as soon as possible,</u> <u>but no later than the first day of school in September</u>.

Your child must receive these two new immunizations before entering 6<sup>th</sup> grade in September. If your child will not be eleven years old until after the first day of school in September, you will have <u>two</u> weeks from their birthday to comply with these State mandates.

Thank you for your attention to this important matter. Please return only to the school nurse.

Please return or fax the information below to the attention of: Karen Lambo RN BSN CSN Brittany Giannacio RN BSN

School Nurse – Fax number: 908-322-6813

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STUDENT NAME:	GRADE:	
ADDRESS:	DATE OF BIRTH:	
Please complete the date the following	g immunizations were administered:	
Meningococcal Vaccine	Tdap Booster	
Physician's Signature	Date	

Physician's Name/address (Please print or use stamp)