



BUCKS COUNTY TECHNICAL HIGH SCHOOL

610 Wistar Road, Fairless Hills, Pennsylvania 19030

School Nurses Office

Phone: 215.949.1700 ext. 2186 Fax: 215.949.8024 www.bcths.com

A campus of Bensalem, Bristol Borough, Bristol Township, Morrisville, Neshaminy & Pennsbury School Districts

Parent Verification of Physical Examination

If your **11th grade** child has had a recent physical examination within the past 12 months you may submit this form to verify. Please complete the form and *attach* a copy of their updated immunization record. Please send to the Nurses Office *or Fax* a copy to the **School Nurse at 215-949-8024**.

Student Name: _____ Grade: _____

Date of Birth: _____

Physical Examination performed by: _____

Physician Telephone Number: _____

Date of Exam: _____ Were findings normal? Yes _____ No _____

*Please list any health concerns identified: _____

Were any medications prescribed? Yes _____ *** Please list below* No _____

**Please list any medications and the condition(s) for which they are prescribed: _____

Any *new* immunizations? If so, please list including the date received.*** _____

****PLEASE* remember to attach an updated copy of your child's immunization record or you may ask the doctor's office to **Fax** a copy to the **School Nurse at 215-949-8024**.

Parent/Guardian Signature _____ Date _____