



Superintendent: Dr. Rod Thompson

[DATE]

[PARENTS(s)]

[ADDRESS]

[CITY], [STATE] [ZIP]

Re: Non-Enrollment for Lack of Immunization Proof

Dear Parent(s):

We are sending your child, [NAME OF CHILD], home today because we have not yet received proof that he or she has received appropriate immunizations or is excepted therefrom. Minnesota law does not allow us to enroll an elementary or secondary school student without proof that the student has received the required immunizations or is excepted therefrom.

As we advised earlier, State law and School District policy allow for a thirty-day grace period and a ten-day due process period during which your child may attend school. Those grace periods have now expired.

[NAME OF CHILD] may re-enroll as soon as we have received appropriate proof of immunizations. If you have any questions about the proof or the immunizations required, please contact [NAME OF SCHOOL OFFICIAL] at [TELEPHONE NUMBER] as soon as possible.

We look forward to having [NAME OF CHILD] back in school soon.

Sincerely,

[NAME OF SCHOOL OFFICIAL]

DISTRICT NOTES:

Previous notices sent on	_____	by	_____
Phone contacts on	_____	by	_____
Phone contacts on	_____	by	_____