

**PASADENA UNIFIED SCHOOL DISTRICT
HEALTH PROGRAMS**

ANNUAL REPORT OF VISION TESTING

School Name	Superintendent		
Number and Street	City	Zip Code	County
Period covered	Prepared by	Telephone () -	

RESULTS OF SCREENING

(Include pupils in gifted and remedial speech classes in regular grades)

Grade level	Enrollment in each grade screened	Total number of pupils screened	Number of pupils rescreened	Number of pupils referred for professional examination	Number of pupils referred actually under professional care	Color vision (boys)	
						Number tested	Number failed
	1	2	3	4	5		
K							
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
Sp. Ed.							
Totals							