



THORNTON TOWNSHIP HIGH SCHOOL DISTRICT 205

465 EAST 170TH STREET, SOUTH HOLLAND, ILLINOIS 60473-3481
MAIN: 708.225.4000 | FAX: 708.225.4004 | WWW.DISTRICT205.NET

Nathaniel Cunningham Jr., Ph.D., Superintendent

Please read this document for information on which health documents are to be turned in to the Nurses' Office for the upcoming 2021-2022 school year. This applies to **all incoming freshmen, transfer and outplaced students, and those students who are on our exclusion list from the previous year (for not turning in required health records)**. Please do not mail forms to your school; drop off health records or email pdf documents to the nurses at your respective school.

1. PHYSICAL EXAM – IL CERTIFICATE OF CHILD HEALTH EXAMINATION

A physical examination, including a diabetes risk assessment screening and physical education approval, must be completed and signed by a physician within one year of entering 9th grade. Parents must also complete and sign the medical history portion on the back page of the form. For your freshman to participate in athletics, your child's physician must also complete either an IHSA Pre-participation Examination or the sports approval section the Illinois Certificate of Child Health Examination form. All other grades must submit an IHSA Pre-Participation Examination.

2. IMMUNIZATIONS

Day, month, & year of doses are required, as well as a signature and stamp by a health care provider. Doses must include:

- (3 doses) Polio with the last dose after age 4
- (3 doses) DTP/DTaP/Td with the last dose after age 4, along with a Tdap
- (3 doses) Hepatitis B
- (2 doses) Measles, (2 doses) Mumps, (2 doses) Rubella, (2 doses) Varicella {1st given on or after the 1st birthday; 2nd given no less than 4 weeks (28 days) later}
- (1) dose of the Meningococcal Conjugate Vaccine for 9th, 10th, & 11th graders.
- (2) doses of the Meningococcal Conjugate Vaccine for 12th graders. Only 1 dose is required if 12th graders received the 1st dose on or after their 16th birthday.

3. SCHOOL DENTAL EXAMINATIONS – NEW REQUIREMENT

Dental exams or waiver must be submitted by May 15th of the current school year and must be completed no more than 18 months prior to the May 15th deadline. Dental examination must be recorded on the appropriate State of Illinois, IDPH, Proof of School Dental Examination Form.

4. EMERGENCY NOTIFICATION FORM

Please equip your nurses with as much information as possible on where you can be reached during school hours. Consider the availability of the emergency contacts in the event you cannot be reached.

5. REQUEST FOR ADMINISTRATION OF MEDICATION

Illinois Law requires written permission, from both a physician and parent, for **any and all** prescription and over-the-counter medications, which are to be administered during the school day. A School Medication Administration Form must be completed by both a parent and physician for medication to be administered during school hours. Students who bring medication to school without a written consent will have their medication confiscated.

Please review both sides.

Dr. Justin P. Moore, Principal
THORNBRIDGE HIGH SCHOOL

15000 Cottage Grove Av., Dolton, IL 60419
MAIN: 708.271.4411 | FAX: 708.225.5020

Dr. Tony Ratliff, Principal
THORNTON TOWNSHIP HIGH SCHOOL

15001 Broadway Av., Harvey, IL 60426
MAIN: 708.225.4109 | FAX: 708.225.5014

Don C. Holmes, Principal
THORNTON TOWNSHIP HIGH SCHOOL

17101 South Park Av., South Holland, IL 60473
MAIN: 708.339.7800 | FAX: 708.225.5033

If your student has been diagnosed with **ANY** acute or chronic health condition, please notify your respective school nurses' office to obtain the proper forms to be completed by your student's physician, such as an asthma action plan, diabetes medical management plan, or seizure action plan. Depending on the diagnosis, you may also be responsible for providing medication, supplies, and supplemental documentation for your student that is kept in your school nurses' office throughout the school year.

For blank copies of all forms listed above, please contact your respective school nurses' office or print forms from **www.district205.net > PARENT INFO > HEALTH SERVICES**

Listed below is the contact information for the Nurses' Office at each school.

THORNRIDGE HIGH SCHOOL

Kenya Moss, RN
Moss.Kenya@district205.net

Ph: 708-271-4479
Fax: 708-271-1786

THORNTON HIGH SCHOOL

Melissa Graham, RN
Graham.Melissa@district205.net

Lisa Harris, RN
Harris.Lisa@district205.net

Ph: 708-225-4178/4179
Fax: 708-225-4060

THORNWOOD HIGH SCHOOL

Teressa Kent, RN
Kent.Teressa@district205.net

Xochitl Rosas, RN
Rosas.Xochitl@district205.net

Ph: 708-225-4779/4090
Fax: 708-225-4856

OUTLOOK ACADEMY

Viola Johnson, RN
Vjohnson@ttdistrict205.net

Ph: 708-225-5867
Fax: 708-225-5870

Dr. Justin P. Moore, Principal
THORNRIDGE HIGH SCHOOL

15000 Cottage Grove Av., Dolton, IL 60419
MAIN: 708.271.4411 | FAX: 708.225.5020

Dr. Tony Ratliff, Principal

THORNTON TOWNSHIP HIGH SCHOOL

15001 Broadway Av., Harvey, IL 60426
MAIN: 708.225.4109 | FAX: 708.225.5014

Don C. Holmes, Principal

THORNWOOD HIGH SCHOOL

17101 South Park Av., South Holland, IL 60473
MAIN: 708.339.7800 | FAX: 708.225.5033

