Fairview Park City School District

21620 Mastick Rd., Fairview Park, OH 44126 P: (440) 331-5500 • F: (440) 356-3545
Keith Ahearn, Superintendent • Rob Showalter, Treasurer
MS/HS Clinic Fax: (440) 356-3529 • **Gilles-Sweet Clinic Fax:** (440) 356-3701 • **EEC Clinic Fax:** (440) 356-3544

Letter to Upcoming 7th Grade Parents/Guardians
Tdap Booster & Meningococcal Vaccine

Dear Parents/Guardians,

The Ohio Department of Health School Immunization Requirements have been revised to include **one dose of Meningococcal (MCV4) vaccine** to be administered before a student enters the seventh grade.

Your child also requires a **dose of Tdap** to be administered before a student enters the seventh grade. This dose is intended to be administered as a booster dose for students who have completed the required doses of the initial series of DTaP/DT/Td. If your child received one dose of Tdap as part of the original serie, another dose of Tdap will not be required. The Tdap can be given regardless of the interval since the last tetanus or diptheria-toxoid containing vaccine.

Therefore, your current sixth grader will need to show proof of having received the **Meningococcal (MCV4) vaccine** and **Tdap booster dose** before they can return to school in the fall for seventh grade.

You are receiving this letter now to provide you with ample time to have your child immunized before the coming school year begins. Please contact your physician or health department to schedule an appointment.

****If you choose to have your child exempted from the following vaccines, due to personal, religious, spiritual, and/or medical reasons, please complete and sign the vaccine exemption/waiver on the clinic website. Please state on the blanks on the form which vaccine(s) are being exempted and for what reason. A parent/guardian signature is required on the bottom, and a doctor's signature, if applicable (only for medical reasons).*

Please provide the date your child received the vaccines below and/or a vaccine record to school nurse by the first day of school. If waiving immunizations, an exemption/waiver form must be turned in.

Refer to the school clinic website for the most updated immunization chart and vaccine exemption/waiver form: **www.fairviewparkschools.org/clinic.**

Student First/Last Name		**Meningococcal (MCV4)**	/ /
Parent/Guardian Signature		**Tdap**	/ /