

Allen W. Roberts Elementary School

80 Jones Drive
New Providence, NJ 07974

Tel: 908-464-4707

Fax: 908-464-4708

Dear parents/guardians of _____,

All Pre-K children are required by NJ State law to obtain the seasonal flu vaccine sometime between September and November.

Please be aware that the New Jersey Department of Health has updated its immunization policies. New Jersey State law now requires all Pre-K children to get their seasonal flu vaccine by **November 30th**. **When completed, return this form, a signed note from your healthcare provider, or a copy of the updated immunization record to the health office by November 30th.**

STUDENTS WITHOUT PROOF OF THE VACCINE WILL NOT BE ALLOWED TO RETURN TO SCHOOL ON DECEMBER 1st

Please call to make an appointment with your child's healthcare provider as soon as possible to schedule their immunization.

Thank you for your attention to this important matter. If you have any further questions regarding the flu vaccine or if you believe you have received this notice in error, please contact me at 908-464-4707 ex. 3514 to discuss.

Sincerely,

Jessica Leon
School Nurse
jleon@npsdnj.org

Student _____ received the influenza vaccine on _____.
(Date)

Signature of Health Care Provider

Print or Stamp of Health Care Provider

**Return this for or a note signed by your healthcare provider to the health office by
December 1st**