

Physical Examination

According to the School Health Code, **each student upon first entry or in Grades K, 6, and 11** are required to have a physical examination. This exam may be done by the student's family physician or by the school physician.

It is recommended that the exam be done by your family physician since this provides for continuity in your child's medical care. However, if you do not choose to have your child examined by your family physician, he/she may participate in the school exams to be scheduled at a later date during this school year. *Please be advised that the school exam is a screening exam only. Any health issues identified during the screening will need to be evaluated by your family physician or other source of medical care.*

Please indicate below if you would prefer to have your child examined by your family physician at your own expense; if your child has been examined by your family physician within the past year; or, if you prefer to have your child examined by the school physician. Please return this form immediately.

If you choose to have your child examined by your family physician, **please request that the physician complete the attached Private Physician's Report form** and return to your child's school nurse. (NOTE: many students have physicals for camp, driving license, working papers, immunizations, illness, and sports, by their family physicians which would meet this requirement.)

Student Name: _____

_____ My student has or will have a PIAA sport physical (grades 7-12)
Name of PIAA Sport(s): _____

_____ I prefer that my student receive the exam by the school physician.

_____ My student has been or will be examined by our family physician.
All Information must be completed to fulfill physical requirement.

Family Physician _____

Date of exam or next appointment _____

_____ Completed Physical Form already returned to school

Parent/Guardian Signature _____ Date _____