

# Glenbard East Medical Requirements for 9th grade and new transfer students

ALL DOCUMENTS SHOULD BE SUBMITTED TO THE SCHOOL NURSE

EMAIL: [laura\\_grabowski@glenbard.org](mailto:laura_grabowski@glenbard.org) FAX: 630-424-6438

Or mailed to: Glenbard East Health Office

1014 S. Main St. Lombard, IL 60148

**School Physicals:** A Certificate of Child Health Examination (also known as a school physical) is required to enroll in high school for incoming freshmen and/or transfer students by **July 15, 2024**. (*Reminder: This is different from a sports physical which is needed for athletic participation*). The school physical **must** be signed by a physician, nurse practitioner or a physician's assistant, and be **less than 1 year old** at the start of the school year. For example, if the last physical is dated 8/6/2023, it will not be accepted to start of the 2024-2025 school year (the first day is 8/15/2024).

**Freshman / Transfer student health examinations are due: July 15, 2024**

**Summer School Students:** A Certificate of Child Health Examination (school physical) is required for **all** freshman and/or transfer students who plan to participate in summer school by **May 20, 2024**. (*If a student has an 8th grade physical on file, a **new** physical must be submitted by July 15, 2024*). All school physicals **must** be **less than 1 year old** as 8th grade physicals will not be accepted at the start of the 2024-2025 school year.

**Freshman / Transfer student Summer School health examinations are due: May 20, 2024**

Students will **not** be permitted to start school (or summer school) on the first day without completing the following requirements (board policy 7:100):

- **State of IL Certificate of Child Health Examination**
  - Must be completed by your doctor and dated **within the last year** to be accepted.
  - Health history **must** be completed by parent (second page/top)
  - Sport physicals are **NOT** accepted as the school physical
  - Resources and forms can be found on our website  
[www.glenbardeasths.org](http://www.glenbardeasths.org)

- **Immunizations**

Tdap (1 dose)


DTap, DT, or Td (3 or more doses: last dose on/after 4th bday)

IPV/OPV (3 or more doses: last dose given on/after 4th bday)

Hepatitis B (3 doses)

MMR (2 doses)

Varicella (2 doses)

 **Meningococcal** (1 dose on/after the 11th bday)

**In addition, the Health Office is requesting:**

- **Medical action plans & medication forms**
- **Dental Exam** (form from current year)