



CTU-0246



SCHOOL VACCINATION 4TH GRADE CONSENT FORM FOR PARENTS / GUARDIAN

SECTION A – IDENTIFICATION OF CHILD

Last name : _____ First name: _____

Date of birth (yyyy/mm/dd) : _____ Gender : ☐ M ☐ F

Names of parents or guardian

Mother : _____ Father : _____

Guardian : _____

SECTION B – CHILD'S MEDICAL AND VACCINATION HISTORY

1 - Has your child ever had a serious allergic reaction that required emergency medical care? ☐ YES ☐ NO ☐ I DON'T KNOW

2 - Does your child have immune-system problems due to a disease (e.g. leukemia) or medication (e.g. chemotherapy)? ☐ YES ☐ NO ☐ I DON'T KNOW

3 - Has your child ever had chickenpox when he or she was over 1 year old ? ☐ YES ☐ NO ☐ I DON'T KNOW

If YES, please indicate your child's approximate age at the time of chickenpox : _____

SECTION C - CONSENT

RETURN THIS SIGNED FORM WHETHER OR NOT YOU CONSENT TO VACCINATION

As the parent or guardian of a child under 14 years, you are responsible for decisions concerning vaccination for that child as well as the transmission of personal information concerning them.

Explanations to help you make an informed decision are provided in the booklet attached to this form. If you would like additional information about vaccination programs, please contact your local CLSC or speak with the school nurse.

Do you accept the following recommended vaccines according to your child's current vaccination status?

- | | | |
|---|-----------------------------------|-----------------------------------|
| 1. Vaccine against : HEPATITIS A | <input type="checkbox"/> I ACCEPT | <input type="checkbox"/> I REFUSE |
| 2. Vaccine against : HUMAN PAPILLOMAVIRUS (HPV) | <input type="checkbox"/> I ACCEPT | <input type="checkbox"/> I REFUSE |
| 3. Vaccine against : _____ | <input type="checkbox"/> I ACCEPT | <input type="checkbox"/> I REFUSE |
| 4. Vaccine against : _____ | <input type="checkbox"/> I ACCEPT | <input type="checkbox"/> I REFUSE |

Signature of mother, father of guardian

Date (yyyy/mm/dd)

Relationship (mother, father or guardian)

