****** TO: Parents/Guardians

 FROM: Kanette Jackson, School Health Aid

 RE: Meningococcal Vaccine

Dear Parent/Guardians,

Beginning with the 2016-2017 school year, the Ohio Department of Health school immunization requirements have been revised to include two (2) doses of Meningococcal (MCV4) vaccine to be administered **before a student enters the twelfth grade**.

The second dose of MCV4 must be administered on or after the sixteenth birthday with at least eight (8) weeks between the first and second dose. If the first dose of MCV4 was administered on or after the sixteenth birthday, a second dose is not required. If a child is in the twelfth grade and is fifteen years of age or younger, only one (1) dose is required.

**Therefore, your child will need to show proof of having received the Meningococcal (MCV4) vaccine(s) BEFORE they can return to school in the fall as a senior.**

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.

*Please provide the date(s) that your child received the vaccine:*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ received the Meningococcal (MCV4) vaccine on

 *Student’s Name*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *Date Date*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Parent/Guardian Signature*

***Please return form to Trinity High School by the first full day of school in August.***