

West Carroll Community Unit School District

#314

Mrs. Julie Katzenberger, Superintendent
642 South East St. Mt. Carroll, IL
Phone: 815-734-3374 Fax: 815-244-0211

Dear Parents/Guardians:

As registration is approaching, below is the student medical information and requirements for the 2020-2021 school year.

Kindergarten – Requires an eye exam, dental exam and, an Illinois DHS physical with the following immunizations: 4 doses of DtaP, 4 doses of IPV, 2 doses of MMR and 2 doses of Varicella (chicken pox.)

2nd Grade – Requires a dental exam.

6th Grade – Requires a dental exam, an Illinois DHS physical with the following immunizations: 3 doses of Hep B, 1 dose of Tdap, 1 dose of MCV4 (meningococcal), and 2 doses of Varicella (chicken pox.)

9th Grade – Requires a Dental exam and an Illinois DHS physical with the following immunizations: 2 doses of Varicella (chicken pox) and 1 dose of Ddap.

12th Grade – 2nd dose of MCV4 unless the first dose was given after the age of 16.

If you choose to not immunize your student due to religious beliefs, a **Religious Exemption Waiver MUST** be filled out and signed by a **medical provider** and turned into the school **at or before the first week of school**. The state of Illinois no longer accepts a written letter from the parent. This waiver only needs to be filled out and signed by a medical provider if your student is entering a grade where an Illinois physical is required (New students, Kindergarten, 6th grade, and 9th grade.) You can access this form at www.wc314.org under the registration and/or Nurse tab.

Prescription and nonprescription medication will **only** be administered to your student if they need to take it throughout the school day and the medication authorization form has been signed by the parent and physician. The parent also **must provide** the school with the medication. No child will be given Ibuprofen even if the medication form is filled out and

Primary School
Tracey Rein, Prin.
2215 Wacker Road
Savanna, IL 61074
815-273-7747

Middle School
Brady Knop, Prin.
633 S. East Street
Mt. Carroll, IL 61053
815-244-2002

High School
Joseph Hansen, Prin.
500 Cragmoor
Savanna, IL 61074
815-273-7715

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signed if the parent has not sent Ibuprofen into the school for the child labeled with the child's name.

Please refer to the handbook for the district policies regarding medication administration. If your child has an inhaler that he/she needs to use throughout the day please complete a Self – Administration Inhaler Form and return it to the school. You can find this form on the district and individual building website.

If your child has a health need that will be addressed at school, please contact the school nurse to create an Individual Health Plan. The following forms can be found at www.wc314.org : Asthma Action Plan, Diabetic Medical Management Plan, Food Substitution Form, and an Allergy Action Plan.

For any questions regarding the above requirements or to see what your child needs, please do not hesitate to call.

Thank you for your time,

Angie Gendreau, BSN
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West Carroll Primary School Nurse
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