Parent Objection to Physical Examination or Visual Evaluation File: 508.01 - E3

## PARENT OBJECTION TO PHYSICAL EXAMINATION OR VISUAL EVALUATION (For School Admission)

I am the parent or guardian of the following children who are enrolling in the beginner grade or seventh grade in O'Neill Public Schools, or who are transferring from out of state into any grade in O'Neill Public Schools:

Child No. 1: \_\_\_\_\_

Child No. 2:	
Child No. 3:	<del></del>
Child No. 4:	
examination by a physician, physician's assisted of and each school year thereafter, a visu advanced practice registered nurse, or a evaluation is required to be completed with beginner grade and the seventh grade or, grade. The visual evaluation is to consist of external eye health, with testing sufficients	e school be provided with: (1) evidence of a physical stant, or nurse practitioner and (2) for school year 2006-al evaluation by a physician, a physician assistant, an an optometrist. The physical examination and visual nin six months prior to the entrance of the child into the in the case of a transfer from out of state, to any other of testing for amblyopia, strabismus, and internal and ent to determine visual acuity. No such physical equired of any child whose parent or guardian objects
I hereby object in writing to the:	
physical examination visual evaluation (check one or both)	
	nold O'Neill Public Schools responsible for any injury or to obtain a physical examination of visual evaluation
Dated this day of	, 20
	Parent or Guardian

NASB Exhibit Adopted: 08/29/2014