Date: [Insert Date]

To: [Principal Name / School Nurse Name]
[School Name]
[School Address]

Subject: Re-Entry Clearance and Immunization Update for [Student Name]

Dear [Recipient Name],

Please accept this letter as formal notification that [Student Name] is cleared to return to school on [Date of Return] following a recent illness.

According to [Healthcare Provider's Name], the student is no longer contagious and has been fever-free without the use of medication for over 24 hours. All symptoms have sufficiently resolved for them to resume full academic and physical activities.

Regarding immunization requirements, please find the following update:

- [Option A: Attached is an updated immunization record reflecting shots received during this recovery period.]
- [Option B: Due to the recent illness, the scheduled vaccination for [Vaccine Name] was postponed. It has been rescheduled for [Date].]

If you require any additional medical documentation or have questions regarding the student's health status, please contact me at [Your Phone Number] or [Your Email].

Sincerely,

[Your Signature]
[Your Printed Name]
[Relationship to Student]