

[Date]

[Parent/Guardian Name]

[Address Line 1]

[City, State, Zip Code]

Subject: NOTICE OF IMMUNIZATION NON-COMPLIANCE

Dear [Parent/Guardian Name],

According to our records, your child, **[Student Name]** (Grade: [Grade Level]), is not in compliance with state law regarding mandatory school immunizations.

State law requires all students to have current immunization records or a valid legal exemption on file to attend school. Our records indicate that the following documentation is missing:

- [Vaccine Name 1]
- [Vaccine Name 2]
- [Updated Immunization Record/Exemption Form]

Please provide the required documentation to the school office no later than **[Deadline Date]**. Failure to provide this information may result in your child's exclusion from school starting on **[Exclusion Date]** until the requirements are met.

You may satisfy this requirement by providing one of the following:

1. An official immunization record signed by a healthcare provider.
2. A blood test (titer) result proving immunity.
3. A signed medical or religious exemption form as permitted by state law.

If you believe this is an error or if your child has recently received these vaccinations, please contact the school nurse at [Phone Number] or [Email Address] immediately.

Thank you for your prompt attention to this matter and for helping keep our school community healthy.

Sincerely,

[Principal or School Nurse Name]

[School Name]