TEMPORARY EXEMPTION FOLLOW-UP AND EXCLUSION LOG

School:

Directions: At the time of enrollment, list students with a Temporary Medical Exemption and/or 30 School-Day Exemption. Please check the certification needed or the temporary exemption which applies. Write the expiration date under the appropriate month. The student should be excluded from school on the expiration date if he/she is still without proper documentation. When the Certificate of Immunization and/or School-Entry Health Examination is received by the school, write the date received in the column provided. If the student is excluded, indicate date of exclusion and return.

Student's Name	GR	Enrollment	Certif	fication	Temp	orary	W	/rite I	Exen	nptio	n Ex	pirat	tion I	Date	Und	Certification		Date	Date of	
		Date	Ν	leeded	Exemption					Ap	prop	oriate	Mo	nth			Date	e Rec'd	Excluded	Return
			lmm.	Health	Medical	30 Sch.	S	0	Ν	D	J	F	Μ	Α	М	J	lmm.	Health		
				Exam		Day												Exam		