

Student Full Name:	
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Student Year level (in 2022):	
Student COVID-19 vaccination status (select one option)	
	One COVID-19 vaccination complete
	Two COVID-19 vaccinations complete
	No COVID-19 vaccinations complete, but I intend to arrange this during Term 1
	My child will not be vaccinated for COVID-19
	My child has a medical exemption
Student Full Name:	
Student DOB: _	
Student Year level (in 2022):	
Student COVID-19 vaccination status (select one option)	
	One COVID-19 vaccination complete
	Two COVID-19 vaccinations complete
	No COVID-19 vaccinations complete, but I intend to arrange this during Term 1
	My child will not be vaccinated for COVID-19
	My child has a medical exemption