

**LAKEVIEW COMMUNITY SCHOOLS**

**3744 – 83<sup>RD</sup> Street**

**Columbus, Nebraska 68601**

**Phone: 402-564-8519**

**FAX: 402-564-5209**

Dear Parent/Guardian:

Nebraska Statute 79-214 directs that the Board of Education shall require evidence of a physical examination by a qualified physician, physician's assistant, or an advanced practice registered nurse within six months prior to the entrance of a child into the beginner grade and the seventh grade. This statute also states, in the case of a transfer from out of state, to any other grade of the local school a physical examination is also required. No such physical examination shall be required of any child whose parent or guardian objects in writing. The cost of such physical examination shall be borne by the parent or guardian of each child who is examined.

Please have your physician, physician's assistant, or nurse practitioner, complete the Physical Examination Form below and return it to the school of attendance at your earliest convenience.

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**PHYSICAL EXAMINATION**

I hereby certify that \_\_\_\_\_ has been examined

by me on \_\_\_\_\_ (date).

**KINDERGARTEN**       **7<sup>TH</sup> GRADE**       **OUT OF STATE TRANSFER**

(Physician, please check box above to indicate the reason a physical was required.)

\_\_\_\_\_  
Examiner's Signature

\_\_\_\_\_ Unrestricted      \_\_\_\_\_ Moderate      \_\_\_\_\_ Restricted

Significant health problems or comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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