Califon Public School

"Making Their Lives Extraordinary"

Lori Jones Ed.D.
Chief School Administrator

Matthew Herzer
Business Administrator

Welcome to the Califon Borough School District.
In order for your child to be registered in the Califon Borough School District, the Main Office and Health Office will need to have the following on file:

1. ***Birth Certificate*** (original, we will make a copy)
2. ***Proof of Residency*** within Califon Borough (utility bill, lease, tax bill, deed)
3. ***Registration Form*** with all questions completed
4. ***Transfer Card*** from previous school or Records Request permission form (grades 1-8)
5. ***Physical Exam Form*** submitted by students entering **grades preschool-3**, reflecting an exam within 365 days of the first day of entrance to Califon School *(Must be completed by physician).*
6. ***Athletic Pre-Participation Physical Exam Form*** submitted by students entering **grades 4-8** reflecting an exam within 365 days of entrance to Califon School *(Must be completed by physician*).
7. ***Health History Form*** submitted by ***all*** students entering **grades preschool-8**
8. ***Immunization records***, from your physician, which are to include:
   a. *DPT*: Four doses, with one dose given on or after 4th birthday or any 5 doses
   b. *Polio*: Three doses with one dose given after 4th birthday or any 4 doses
   c. *Measles, Mumps, Rubella (MMR)*: Two doses of a measles containing vaccine on or after the 1st birthday, vaccine doses are to be separated by no less than one month or laboratory evidence of immunity. Preschool needs a minimum of 1 dose of the MMR vaccine.
   d. *Hepatitis* B: Three doses with the second dose received no later than three months after the first dose or laboratory evidence of immunity.
   e. *Varicella vaccine* (chickenpox) one dose on or after the first birthday or history of disease or laboratory evidence of immunity.
   f. *Hemophilus Influenza B (Hib):* One dose for preschool students 12-59 months after their first birthday.
   g. *Pneumococcal:* One dose for preschool students 12-59 months after their first birthday.
   h. *Influenza:* One annual dose for preschool students ages 36-59 months, between September 1 and December 31 each year.
9. ***Additional Health Needs Forms*** submitted for any child with allergies, medication requirements, and/or other special needs must be submitted to the nurse prior to enrollment. Please contact Mrs. Sedlacek at (908) 832-2828 ext. 212 for the appropriate forms.

All necessary forms can be printed from the school website at **www.califonschool.org.**
The above information is required by NJ State Law and is essential for the health and well being of all children. Thank you for your assistance with the registration process. We look forward to seeing your family at the Califon School.

Sincerely,

Susan French-Gonzalez
Executive Secretary

Jennifer Sedlacek, BSN, RN, CSN,
Califon School Nurse