

From the Principal's Desk: -

Dear Parent,

As part of the second phase of Vaccination Drive, the school is conducting a vaccine drive in coordination with the Ministry of Health and Ministry of Education, Yanbu. The students from LKG to class 10 shall be administered with the vaccine against Measles, Mumps, Rubella (MMR). We are expecting the MoH Team to administer the vaccines on December 24, 2024 (Tuesday) at the Girls Section Campus. In order to complete the processes related to the vaccine administration, we require your consent for the same. Please make sure that your child takes enough food as breakfast.

Sd/-
Principal

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(Please send this circular back after marking your consent as a tick mark (✓) on the space provided.)

PARENT CONSENT FORM FOR MMR VACCINE (DECEMBER 2024)

I, _____ (parent's / guardian's name), of,
_____ (student's name) studying in
_____ (class & div) of Al Manar Int'l School holding the Iqama Number _____ have
read the above circular and mark my consent below. In case of an emergency/ clarifications, I may be reached at
_____ (Mobile Numbers)

Agree

Disagree

Kindly provide the reason if you disagree _____

Is the child allergic to Egg / sensitive to Vaccines? Yes/ No.(Pls specify if YES) _____

Is your child Asthmatic? Yes/ No.(Pls specify if YES) _____

Is your child on any medications? Yes/ No.(Pls mention if YES) _____

Is your child immunocompromised? Yes/ No.(Pls specify if YES) _____

Parent Signature :.....

date:

