

Content of School Notice to Parents/ Guardians (draft) (For reference only)

Schools may communicate with participating doctors for agreeing on issuing a notice to Parents/ Guardians before drafting the notice. Regarding the content of the notice, schools have to seek advice from the participating doctor on the necessary amendments, additions or deletions.

Dear Parents/ Guardians,

Free Seasonal Influenza Vaccination at School

To encourage school children to receive seasonal influenza vaccination at schools for health protection, and increase the vaccination rate among school children, the Department of Health (DH) is launching the Enhanced Vaccination Subsidy Scheme (VSS) Outreach Vaccination in the School Year 2018/19.

Our school will participate in this Scheme in this school year, and the outreach influenza vaccination service will be provided by the enrolled private doctor of the scheme. The enrolled doctor [Name of the doctor _____/ medical organization (if applicable): _____]

_____] will arrange a vaccination team to provide **free Quadrivalent inactivated/ Trivalent inactivated/ Quadrivalent live attenuated** * seasonal influenza vaccination at our school on _____ (date).

Please read the information of this notice and the appended information leaflets carefully, and **fill in (1) the “Consent to Use Vaccination Subsidy” Form and (2) the Seasonal Influenza Vaccination Health Assessment Form** and return the forms to our school upon completion by _____ (date).

For enquiries, please contact our school / the doctor/ medical organisation during office hours.

Contact phone number of our school:

Contact phone number of the doctor/ medical organisation:

Note: * Please delete as appropriate

XXXX School

Date :