



With this statement I (name of parent/guardian) \_\_\_\_\_ certify that my child's hearing and vision screening records are current and on file at the school my child (name of child) \_\_\_\_\_ attends away from Multilingual Academy (Summer Program or After School Program).

My child's school information:

Name of school: \_\_\_\_\_

Address of school: \_\_\_\_\_

Grade my child attends during the 2019-2020 school year: \_\_\_\_\_

Telephone number of the school: \_\_\_\_\_

Signature of parent/guardian: \_\_\_\_\_ Date: \_\_\_\_\_