

**ST. MICHAEL SCHOOL
REPORT OF VISION EVALUATION**

Please return this form to your child's School Health Office

Effective with the 2006-2007 school year, Nebraska State Statute requires students entering Kindergarten (or 1st Grade, if not enrolled in Kindergarten) to provide evidence of vision evaluation within six months prior to entry. This requirement also applies to students entering 7th Grade, and to out-of-state transfers to any grade.

The evaluation may be performed by a physician, physician assistant, advanced practice registered nurse, or vision professional (optometrist or ophthalmologist).

Children are exempt from this requirement when the parent/guardian provides a written statement to objection. For more information about the vision requirement, including the availability of resources for low-income families, please contact the school nurse or the LPS District Health Services Office at 436-1655.

Name of Student: _____

Examiner: _____

Date: _____

	<u>PASS</u>	<u>FAIL</u>	RECOMMEND FURTHER EVALUATION (See Comments Below)
Amblyopia	_____	_____	_____
Strabismus	_____	_____	_____
Internal Eye Health	_____	_____	_____
External Eye Health	_____	_____	_____
Visual Acuity	_____	_____	_____
20 Feet:	Right 20/ _____	Left 20/ _____	with/without glasses
16 Inches:	Right 20/ _____	Left 20/ _____	with/without glasses

COMMENTS/RECOMMENDATIONS:
