

CONNALLY INDEPENDENT SCHOOL DISTRICT



Medical Restrictions and Orde	rder	0	and	tions	estric	R	cal	edi	M	1
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Students name: As child's attending physician, he/she may attend restrictions as follows:	DOB hours of school with the
The following restrictions apply for school:	
Špecial considerations or precautions that apply while	at school:
Physicians signature:	Date:

Attention: Health Clinic