

## Medical Exemption Form for Remote Learning

Name of the person with the significant health condition:

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Health Condition:

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Written verification of the health condition from the physician or licensed health care provider is **required**.

Whether the person - if other than the child - is a resident of the child's home or caretaker. Parents who want their child to continue Off-Site (Remote) Learning and meet the above mentioned criteria need to contact one of the following Perry Community School District Staff Members:

Joyce Scott at 465-4656, Administration Center

Tennille Perez or Sherre Edmondson at 465-5656, Perry Elementary

Rhonda Kanealy or Nani Soriano at 465-3531, Perry Middle School

Carrie Fellom or Wendy Goodale at 465-3503, Perry High School

Please return Medical Exempt Form to:

Perry School Administration Office

PO Box 69

Perry, IA 50220