



## **School Permission Slip**

Nevada has a computer system that doctors and nurses use to help keep track of their patient's immunizations (shots). This system is called Nevada WebIZ. Doctors and nurses use this computer system to record shots given to patients and access information about their patients' shots, including shots given at other medical offices. This system makes it simple to keep track of a patient's shots even if the patient visits more than one physician. It also makes it easier for doctors and nurses to give the right shots at the right time and to remind their patients when shots are due.

The information in Nevada WebIZ is CONFIDENTIAL. Only authorized users may view it. Authorized users include local or state health departments, doctors and nurses (and their staff), schools, childcare facilities, WIC Programs, and health care plans. The information in Nevada WebIZ can be used to see if shots are up to date, to give shots at the appropriate time, and to bill insurance companies. The information may not be used for any other reason.

***Your school will be accessing your child's immunization record in Nevada WebIZ. They have requested permission to document the historical information ONLY!***

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Please sign this form if you **agree** to allow your child's school administrator and/or school nurse permission to enter your child's immunization history into Nevada WebIZ.

**\_\_\_\_\_ I agree to allow my school administrator/nurse to create a record for my child in Nevada WebIZ because the record does not currently exist. They will only document verifiable historical immunizations.**

My Name: \_\_\_\_\_

My Child's Name: \_\_\_\_\_

Child's Date of Birth: \_\_\_\_\_

My Telephone Number: \_\_\_\_\_

Signature: \_\_\_\_\_

**Please submit this form to your school administrator/nurse!**

Office Use Only

Historical Information Received by: \_\_\_\_\_

Date Entered into Nevada WebIZ: \_\_\_\_\_