Confirmation of Health Records Update

Date: [Insert Date]
[School Name]
[School Address]
[City, State, Zip Code]
Dear [Parent/Guardian's Name],
We are writing to confirm that we have received and updated the health records for your child, [Student's Name], as per your recent submission. The following information has been updated i our system:
 Immunizations: [List Details] Allergies: [List Details] Chronic Conditions: [List Details] Emergency Contact: [Contact Information]
If you have any further updates or questions regarding your child's health records, please do not hesitate to contact us.
Thank you for your attention to this important matter.
Sincerely,
[Your Name]
[Your Position]
[School Name]
[Contact Information]