Student Health Assessment Notification

Date: [Insert Date]

Dear [Parent/Guardian's Name],

We hope this message finds you well. We are writing to inform you that your child, [Student's Name], will be undergoing a health assessment on [Insert Date of Assessment] as part of our ongoing commitment to student health and well-being.

The health assessment will include:

- Physical examination
- Vision and hearing screening
- Height and weight measurements
- Health history review

Please ensure your child is present on the day of the assessment and has a signed permission slip. If you have any concerns or questions, feel free to contact us at [School Contact Information].

Thank you for your cooperation.

Sincerely,

[Your Name] [Your Position] [School Name]