

Health Form Submission

Date: [Insert Date]

[School Name]

[School Address]

Dear [School Administrator's Name],

I hope this message finds you well. I am writing to submit the health form as required for [Student's Name], who is enrolled in [Grade/Class Name]. Please find the completed health form attached for your records.

If you require any additional information or documents, please do not hesitate to contact me at [Your Phone Number] or [Your Email Address].

Thank you for your attention to this matter.

Sincerely,

[Your Name]

[Your Relationship to Student]

[Your Address]