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| Logo placeholder  **Date**  **School Located Vaccine Event(SLVE)** Notice of upcoming vaccination event Dear [Parents/guardians],  Vaccination is the best way to protect your student from [COVID-19 disease]. Our school is working with the [Agency] to give the [COVID-19] vaccine to students at school. We will hold vaccination events beginning this [fall], and school staff will let you know the specific dates. School staff will send you more information about the disease and the vaccine. We will also send you a form that will include options allowing you to either accept or refuse the vaccination for your student. If you refuse, the vaccination will not be given to your student.  If you have any questions about the vaccine or the vaccination event, please call: ([xxx-xxx-xxxx]) from [X AM to X PM]. Please visit your [local health department website] , <https://www.MyTurn.Ca.gov> or the Center for Disease Control and Prevention (CDC) website at <https://www.cdc.gov/coronavirus/2019-ncov/index.html> to learn more about the vaccine. Your student’s health care provider also can answer your questions about the [COVID19] virus and if you prefer, may be able to schedule your student for the [[COVID-19 and or influenza] vaccine at their office. | **Free COVID-19 Vaccines****────****Vaccinators will give COVID-19 vaccine during the school day.****────****Students are expected to need [two doses] of the vaccine spaced about [3 weeks apart].****Organization** Street Address City, ST ZIP Code  Telephone  Web Address |