

School Selection

You have selected St Stephen's CofE Rsa Academy - Mabey Avenue, Redditch, B98 8HW.

If you selected this school by mistake you can **search again**. Otherwise you can move on to the next step.

Continue

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Student Details Please fill out your child's details below. This will help us identify your child when our team carry out the immunisations. Information regarding this treatment may be shared with relevant health staff such as GP, Paediatrician, School Nurse and Child Health. Please note that using the 'back' button, or refreshing your browser could lead you to losing your data. * Denotes a required field Please ensure you use the name your child is legally known as First name * John Middle name Last name Morris Known as Sex * Male Ethnicity Select Class / Tutor group * Dragons School year (2023/24) Year 2 Student Date of Birth Day * Month * Year * 04 Oct 2016 * Student Address Postcode House Name/Number

Find



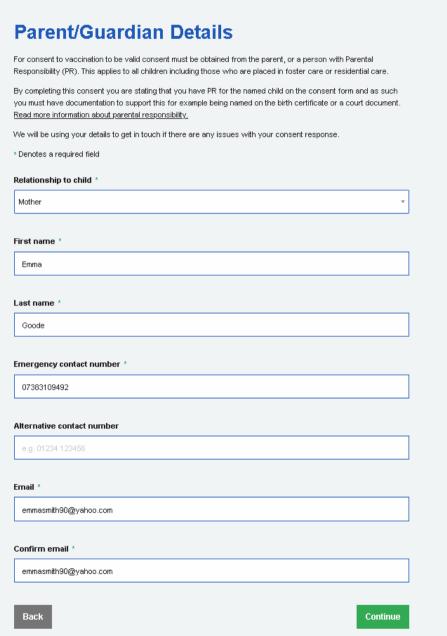
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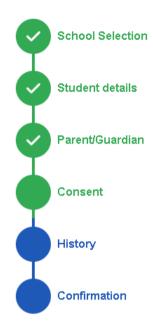












Consent

The flu vaccine

The nasal flu vaccine contains products derived from porcine gelatine.

If you do not wish for your child to receive the nasal flu vaccine there is a gelatine free injection available.

Data & Medical Records

A record of your child's immunisation is held on the child health information system and will be shared with their GP. It is protected by the principles of GDPR.

Consent

If you give consent for your child to receive the flu vaccination, we will ask you questions about your child's medical history on the following page.

Do you consent for your child to receive the flu vaccination? *





Please give reason for declining consent *

Personal choice

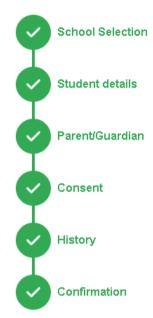
Back

Submit









Confirmation

Thank you for submitting your child's information for our immunisation programme. You will be sent a confirmation email shortly (please check your spam/junk folders if this does not appear in your inbox).

Your reference code is: VUKMID_F_Wed_Sep_13_2023_14331

It is your responsibility to inform the team of any changes to your child's medication or medical condition. Please let the immunisation team know if your child has to increase their asthma medication after you have returned this form OR if the child has been wheezy or unwell WITH ASTHMA within 72 hours prior to the immunisation day.

If you have another child at the same school click here to add another consent.

If you have another child at a different school click here to complete a new consent.

We would be grateful if you could take a couple of minutes to give some feedback on our consent process and VUK's school immunisation service. To complete our short survey, please click on this link:

https://www.surveymonkey.com/r/fluseason2022

We really appreciate your response, every one of them helps inform and improve our service.

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