

Subject: Vaccination Drive for Students

Dear Parents,

We hope this message finds you well.

This is to bring to your kind notice that, as per the directives of the Ministry of Health & Family Welfare, Government of India, a vaccination drive is being organised on the school campus for students.

The following vaccines will be administered:

- Td₁ – Students of Class 10
- Td₂ – Students of Class 12
- HPV – Students of Classes 4 to 12

Parents who wish their ward to receive the vaccination are requested to submit the duly signed consent form by 31st August 2026. The vaccination will be administered at the School Sick Bay on 1st September 2026.

Students must carry their Aadhaar Card or a photocopy of the Aadhaar Card on the day of vaccination.

This campaign aims to ensure that students do not miss their essential vaccinations and to promote better health and immunity among adolescents.

Your cooperation is essential in making this health initiative a success.

Regards,



Ms. Sharmila Raheja
Principal

Consent Circular for Vaccination Drive

I _____ (mother/father) of _____ studying in Class _____. I give my consent for the vaccination of my child with:

DPT / Tdap / HPV vaccine.

My child's Aadhaar No. is _____ and the phone number for OTP _____

Td₁ – Class 10th

Td₂ – Class 12th

HPV – Class 4th–12th

Student's Name: _____

Parent's Signature: _____

Name: _____

Date: _____