BOARD OF EDUCATION

WINTHROP HARBOR SCHOOLS

LAKE COUNTY • DISTRICT NO. 1 500 NORTH AVENUE • WINTHROP HARBOR, ILLINOIS 60096 (847) 731-3085 • (847) 731-3156 FACSIMILE

Information to be completed by applicant - please print

Rick Lambert, President Michelle Good, Vice-President Kimberly Young, Secretary Lise McCarthy, Treasurer Gene Ellison Nicholas Dowdal Laurel Wilson

Pursuant to the School Code of the State of Illinois, new employees are required to provide evidence of physical fitness to perform duties assigned and freedom from communicable disease. Such evidence shall consist of a physical examination and, if appropriate, an e-ray, by a physician licensed in Illinois or any other state to practice medicine and surgery in all its branches, not more than 90 days preceding time of presentation to the Board of Education. The cost of such examination shall rest with the employee.

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| Name (Last, First, Middle): |
| Address: |
| Position: |
| Information to be completed by examining Physician |
| Date of examination: |
| I confirm that there is no evidence of inability to perform the requirements of the position nor evidence of communicable disease identified during the physical examination conducted. |
| Signature of examining physician: |
| Address: |
| Phone Number: |
| Additional Comments: |