

HARDEMAN COUNTY BOARD OF EDUCATION  
**HEALTH REQUIREMENTS**

*Warner A. Ross II*  
*Director of Schools*

P.O. Box 112—10815 Old Highway 64  
Bolivar, Tennessee 38008

Employee's Name: \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

**HEALTH REQUIREMENTS**

In accordance with policies of the State and Local Boards of Education, prior to entering service with the Hardeman County Board of Education, you are required to present a physician's certificate showing a satisfactory health record.

**PHYSICIAN'S CERTIFICATE**

This is to certify that I have examined said employee in the Hardeman County School System, reviewed health history, and find him/her free of contagious or communicable diseases in such forms that might endanger the health of school children.

**TB skin test required only if in at risk category or symptomatic. If so, please attach TB skin test results.**

Exam Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
Examining Physician

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone Number