

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Email Address]  
[Phone Number]  
[Date]  
[School Name]  
[School Address]  
[City, State, Zip Code]

Dear [School Administrator/Principal's Name],

Subject: MMR Vaccine Compliance

I hope this letter finds you well. I am writing to inform you regarding the vaccination status of my child, [Child's Full Name], who is enrolled in [grade/class name] at [School Name].

As per the state regulations and school policies, I want to confirm that my child has received the Measles, Mumps, and Rubella (MMR) vaccine. The vaccine was administered on [Date of Vaccination] by [Provider's Name/Clinic/Hospital Name].

Please find attached a copy of the vaccination record for your reference. Should you require any further information or documents, feel free to contact me at your convenience.

Thank you for your attention to this matter.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]