

**Affidavit for Spinal Screening
to be Conducted by qualified Medical Individual**

STATE OF TEXAS
COUNTY OF _____

BEFORE me, the undersigned authority, on this day personally appeared _____, who after being dully sworn, deposes and says:
(Parent or Guardian)

“I understand that Texas law requires all public and private schools to screen girls at age 10 and 12 and boys at age 13 or 14 for abnormal spinal curvature before the end of the school year, and that schools may also choose to conduct their spinal screening programs for girls in the fall of 5th and 7th grade and for boys in the fall of 8th grade.

I hereby request that _____, NOT undergo
(Name of Student)
spinal screening through the school. I will obtain the screening from my child’s physician and get a copy of the results to the school within 60 days of this affidavit.

(Parent or Guardian)

Sworn and subscribed before me by the said _____ on
this the _____ day of _____, _____.

(Notary Public in and for the State of Texas)