



Center for Teacher Preparation and Partnerships
Education and Professional Studies Building Room 203A
201-200-3015

TO WHOM IT MAY CONCERN:

Kindly perform a Mantoux test for the following student: _____

The test was administered: _____

The results were read on: _____

The results of the test were: _____

A Chest X-ray was administered on: _____

The results of the X-ray were: _____

Medical Personnel Title: _____

Medical Personnel Signature: _____

STUDENT MUST COMPLETE THE FOLLOWING:

Name _____ Department _____

CP1 __ CP11 __ Semester & Year of Placement _