

LOS ANGELES UNIFIED SCHOOL DISTRICT
Berenece Carlson Home/Hospital School
10952 Whipple Street • North Hollywood, CA • 91602
Telephone: (818) 509-8759 • Fax: (818) 505-0246

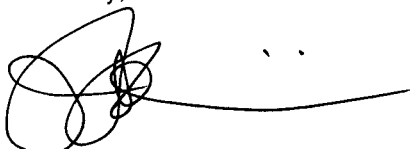
DAVID BREWER III
Superintendent of Schools
DEBORAH RUBENACKER
Director, Related Services
JANICE DAVIS
Director, High School Programs
JOE SALVEMINI
Administrator

Date: _____

Dear Doctor:

Your patient, _____ Date of Birth: _____,
has been receiving Home Instruction from _____, Teacher,
during his/her convalescence. The allocated time is expiring on _____. If, in your
professional medical opinion, further service is required, please complete and return the required information at the
bottom of this letter. Thank you.

Sincerely,



Joe Salvemini,
Administrator

⇒ Service extended to: _____

⇒ Physician's Signature: _____, M.D.

Physician's Name (Print): _____

Physician's Address: _____

Physician's Telephone: (____) _____

Physician's FAX: (____) _____

"The teachers, administrators and staff of the Los Angeles Unified School District believe in the equal worth and dignity of all students and are committed to educate all students to their maximum potential."