1	SCHOOL INFORMATION		School Email: ERE	IMULLER@AUSD	K12.OR	
School Name: CORNELL E		MENTARY				
Information	CDE School Code: 6090146		Physical Address: 920 TALBOT AVENUE Status: Active			
	Type: private public		Status tour o			
	County: ALAMEDA					
2	DESIGNATED SCHOOL CONTACT					
Contact	Name: JANET SCAGLIONE					
Information	Email: JSCAGLIONE@AUSDK12.ORG					
	Phone Number: <u>510-558-3702</u>					
3	STAFF MEMBER COMPLETING THIS	FORM				
	Name: JANET SCAGLIONE					
Summary	Email: JSCAGLIONE@AUSDK12.ORG					
Report	Phone Number: 510-558-3702					
	Report Submitted Date: 2021-0					
	Report Submitted Date.					
Total numbe	er of TK/Kindergarten Students:	20				
Account for ea	ach student in one of the categories	below.				
UNCONDITIO	NAL ADMISSION:					
Requirem	ents Met					
All Require	d Vaccine Doses	A 20				
Requirem	ents Met, But Missing Doses		Missing Doses By V	accine		
Permanent Medical Exemption			0 Students a	O Students are missing doses.		
Includes MD/D	O verification of varicella disease	c 0	Total number of stude	nts missing each v	accine:	
Other:			Polio 0	Нер В	0	
IEP Services		F1 0	DTaP 0	Varicella	0	
Independent Study		F2 0	MMR 0			
Home-based Private School		F3 0				
CONDITIONA	L ADMISSION, NEED FOLLOW-U	JP:				
Conditional- Missing Doses Not Currently Due		В 0				
Temporary Medical Exemption		D 0				
REQUIREMEN	ITS NOT MET, MISSING DOSES					
Overdue- Needs Doses Now		g 0				
	less or foster care students in process of					
locating record		20				
	TOTAL	20				