



WALLENPAUPACK AREA SCHOOL DISTRICT

HC 6, Box 6075
Hawley, PA 18428-9007
(570) 226-4557 ext. 3000
Fax: (570) 226-0638

Medical Authorizations

<i>Student's Last Name</i>	<i>Student's First Name</i>	<i>Date</i>
<i>Homeroom Teacher</i>		<i>Grade</i>

A. Releasing Authority for Treatment

I request the school to contact me in case of emergency, illness or accident requiring emergency care. If the school is unable to reach me, I hereby authorize the school to call the physician indicated and follow his/her instructions. If it is impossible to contact this physician the authorized person may make whatever arrangement and transfer pertinent medical records that are deemed necessary. I understand that this emergency care authority may be exercised either locally or when a student is away on a trip.

B. Medication Policy:

It is the policy of the Wallenpaupack Area School District not to distribute medication of any kind without the written permission of the physician or parent/guardian. This includes non-prescription and prescription medicines. The students are not allowed to have medicine of any type in their possession. *See the Student/Parent Handbook for more information.*

C. I understand that State law requires the following:

- Physical Examination at time of original entry and in Grades 6 and 11
- Dental Examination at time of original entry and in Grades 3 and 7
- Screening for vision at time of original entry then yearly
- Screening for hearing at time of original entry and in Grades K, 3, 7 and 11
- Screening for growth at time of original entry then yearly
- Screening for Scoliosis in Grades 6 and 7

If physical and dental examinations are done privately, reports/forms are to be returned to the school nurse by the first week of October or these examinations will be done in school. If done in school, parent/guardian will be informed of any abnormal results.

D. Releasing Medical Information

I understand student medical information will only be disclosed by the nurse's office to school staff to the extent necessary to ensure the safety of a student. Medical information shall also be released to medical personnel, but only when necessary to aid in providing emergency treatment. *See the Student/Parent Handbook for more information.*

<i>Parent/Guardian Signature</i>	<i>Date:</i>
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