

Medical Alert Form

Student Name _____ Birthdate _____
Last First Middle
 School _____ Grade _____ School Year _____ (e.g. 2024-2025)

Does your student require medication or have health conditions that affect them at school? ☐ Yes ☐ No

IF YOU CHECK NO, THEN NO FURTHER INFORMATION IS NEEDED. PLEASE SIGN AND DATE THE BOTTOM

Medications (including prescription, supplements, and over the counter)

ALL medications at school require a **Medication Administration Authorization form**. Forms are available at www.willowsprep.com under Health Services or from the school office.

Medication to be given at school _____ Medication taken at home _____

Life-Threatening Conditions or Other Serious Health Conditions

Life-threatening definition per RCW 28A.210.320(4): Any health condition that will put the child in danger of death during the school day if a medication or treatment order and a nursing plan are not in place.

If your student has a serious health condition, it is very important that you discuss this with the School

IMMEDIATELY. Washington State Law (RCW 28A.210.320) requires that medication, treatment orders, and an individual health plan be in place prior to attending school. Contact the school office to develop a health plan for your student.

My student has the following serious health conditions – Check boxes below:

☐ **Asthma:** Requires an inhaler at school? ☐ Yes ☐ No

☐ **Cardiac Diagnosis:** _____
 Restrictions: _____

☐ **Diabetes:** ☐ Insulin Pump ☐ Insulin Pen ☐ Insulin Syringe

☐ **Life-Threatening Allergy:** Requires epinephrine/EpiPen? ☐ Yes ☐ No
 Allergen(s): _____

☐ **Seizure Disorder** (Describe): _____
 Medication(s): _____

☐ **Other serious health condition(s):** _____

Parent Signature: _____ **Date:** _____

Parent/Guardian is responsible for notifying staff/coaches or after school programs of all medical concerns, however, this form will be reviewed by the School and shared with educational staff. If your student has health changes throughout the year, it is the responsibility of the parent/guardian to notify the School.