Medical Report Form

St. George's Episcopal School
4301 N. IH 35
Austin, Texas 78722
P: 512-452-6063
F: 512-532-8137

Child's Name____ Sex______ Birthdate _____/_____/______

Address____ Home Phone________________ Age_________

Parent/Guardian Name ________________________________Parent /Guardian Name___________________________________

Physician's Address (**required)**____

I give permission for these records to be shared with St. George's Episcopal School's staff.

Parent's Signature Date

This section must be completed by physician or nurse. ***And Immunization Record attached.***

Allergies i.e. medication / environmental / food

____

Health problems, impairments, or other special needs____

Has this child suffered seizures?________ Explain____

Illnesses child has had: Chicken Pox_____ Measles_____ Mumps_____ Other__________________________

Has child suffered serious injury or illness during past 12 months?_____ Explain_____________________

Has child been hospitalized during past 12 months?_____ Explain_________________________________

Is child currently taking medication? _____ Explain____

Does child require a special diet? _____Explain____

Other health or developmental concerns i.e language, cognitive, gross or fine motor, social or emotional

____

Does child require the use of any medical device i.e. inhaler/ epi-pen, etc. ?_____________________________

Is child physically able to participate in a school program? _____ If not, please list any activities which should be excluded____

Please complete the following for children who are 4, 5, and 6 years old as of Sept. 1

Hearing screening: Date_____/_____/_____ Rescreen Date:_____/_____/_____

Pass _____ Fail _____ Pass _____ Fail _____

Vision Screening: Date_____/_____/_____ Rescreen Date:_____/_____/_____

Pass _____ Fail _____ Pass _____ Fail_____

Physician's' Statement: I have examined the above named child within the past year and find that he/she is physically able to take part in the school program.

____ __________________________

Physician's signature Date