STUDENT NAME:_____ ID # _____
SCHOOL:_____ GRADE: _____

ESCONDIDO UNION HIGH SCHOOL DISTRICT
HEALTH SERVICES

Dear Parent(s) or Guardian(s) School Year: 2018-2019

Previous school records indicate that your child may have a bee allergy. We want to be sure your child will be given the appropriate care if they should require it for a bee sting. We ask your cooperation in completing this form and returning it to the school health office or by mail as soon as possible.

Thank you for your assistance.

Escondido Union High School District Health Services
302 N. Midway Dr. Escondido, CA 92027
Fax: 760-741-1846
School Fax _____

□ My child has never been stung and does not have a known bee allergy.
□ My child has been stung and had the following reaction:
- □ No reaction
- □ Swelling at the site only (list site) _____
- □ Breathing or airway problem
- □ Nausea or vomiting
- □ Other (please explain) _____

Does your child require medication for bee stings? □ **Yes** □ **No**

If yes, please indicate the name of the medication and have your child's physician complete the medication authorization form:

_____

If Not, please return this form with your signature, so that we may update school records. Thank you!

If your child requires medication, please return the medication authorization form enclosed, as well as any other forms included in this mailing. These forms can be either returned in person to the school, mailed to the district office, or faxed. All medication should be brought to the health office with the medication (in its original container) prior to the start of school. This policy applies to both prescription and over the counter medication. Depending on the school site, some medications will be accepted during registration. Check with your school's Student Health Care Specialist for availability.

Name: _____ Phone: _____
Parent/Guardian Signature: _____ Date: _____

STUDENT NAME:_____ ID # _____
SCHOOL:_____ GRADE: _____

District Nurse
District service center
302 N. Midway Dr.
Escondido, CA 92027

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School Campus Contact Information:

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San Pasqual High School

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Orange Glen High School

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Escondido High School

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