NATCHEZ ADAMS SCHOOL DISTRICT
STUDENT HEALTH HISTORY 2019-2020

THE FOLLOWING INFORMATION IS CONFIDENTIAL. IT IS USED BY THE SCHOOL NURSE, SCHOOL DIETICIAN, AND PE DEPARTMENT AND WILL BE SHARED ONLY ON A NEED TO KNOW BASIS.
PLEASE COMPLETE THE FRONT AND BACK OF FORM AND RETURN TO YOUR CHILD'S SCHOOL.

STUDENT'S NAME____
GRADE LEVEL: ____________ **DATE OF BIRTH**__________ **SEX/GENDER** ☐ **M** ☐ **F**
MAILING ADDRESS: ____
CITY: _____________________________**STATE:**____________ **ZIP CODE:** ____________

MOTHER'S NAME___________________________**PHONE (H)** _____________ **(C)** _____________
EMAIL ADDRESS____
PLACE OF EMPLOYMENT__________________________ **PHONE (W)** _______________________

FATHER'S NAME_____________________________**PHONE (H)** ____________ **(C)** ______________
EMAIL ADDRESS____
PLACE OF EMPLOYMENT________________________**PHONE (W)** __________________________
EMERGENCY CONTACT OTHER THAN PARENTS/GUARDIANS (PLEASE LIST TWO)

1. **NAME**______________________________________**PHONE**______________________
2. **NAME**______________________________________**PHONE**______________________

SIBLINGS: NAME **SEX** **AGE** **SCHOOL**
1. ____
2. ____
3. ____
4.____

MEDICAL INFORMATION
DOCTOR____

DENTIST:______________________________ **PHONE:** __________________________

PLEASE LIST ANY MEDICATION YOUR CHILD TAKES DAILY.
MEDICINE____________________________**REASON FOR MED**______________________________
MEDICINE____________________________**REASON FOR MED**______________________________
MEDICINE____________________________**REASON FOR MED**______________________________
INHALER ____________________________ **FREQUENCY**_________________________________

DOES YOUR CHILD HAVE ANY MEDICATION ALLERGIES? YES_______ NO_______ If yes, please list____

OTHER ALLERGIES? Food or Objects (PLEASE CHECK or LIST) __________
☐ *BEE STING* ☐ *WASP STING* ☐ *ANT STING* ☐ *OTHER INSECT STINGS*
☐ *POISON IVY* ☐ *DUST* ☐ *MOLDS* ☐ *PEANUTS OR OTHER NUTS*
☐ *FISH*

DOES YOUR CHILD WEAR GLASSES? YES___NO___ LEGALLY BLIND? YES___NO___

Revised 5/2019