

HEALTH AND WELLNESS

All students entering school for the first time and all fifth-grade students are required to present evidence of a physical examination and a record of immunizations before starting school. All other students transferring into the school are required to provide their most recent health and immunization records. All students entering AGBMS must comply with immunization and health regulations of Cook County, the Illinois State Board of Education, and the State of Illinois.

Child's Name: _____ Birth Date: _____

Check any health conditions which apply: *(this information to be updated annually on emergency cards)*

Special Dietary Needs (i.e. no egg, no pork, vegetarian, etc.)

Allergies

Asthma

Heart Condition

Insect Sting Reaction

Epilepsy/Seizures

Hearing Loss

Vision Impairment

Diabetes

Mobility Impairment

Stomach or Bladder Issues

Takes daily prescribed medication for chronic illness or condition

Other pertinent health information the school should know:

HOME AND FAMILY INFORMATION

PARENT #1

Last Name: _____ First Name: _____

Cell Phone: _____ Email: _____

Occupation: _____ Employer: _____

Work Phone: _____

PARENT #2

Last Name: _____ First Name: _____

Cell Phone: _____ Email: _____

Occupation: _____ Employer: _____

Work Phone: _____

SIBLINGS

Name and Age of each Sibling:

How did you hear about the school? _____

Who referred you to the school? _____

By entering your name below, you agree that the above information is up to date and correct and is considered your electronic signature.

Parent/Guardian Signature: _____

Today's Date: _____