



LL#121381

STUDENT EMERGENCY MEDICAL INFORMATION

****PARENTS MUST NOTIFY SCHOOLS IN WRITING OF ANY CHANGES TO THEIR CHILD'S MEDICAL INFORMATION DURING THE COURSE OF THE YEAR.**

****PARENTS MUST COMPLETE THIS FORM ANNUALLY.**

FIELD TRIP EMERGENCY MEDICAL INFORMATION (Write below or attach a separate page if more space is needed)

Student Name: _____ Birth Date: _____

Parent/Guardian Name: _____

Phone Number: (W) _____ (H) _____ (C) _____

Manitoba Health Personal Health Identification Number (PHIN) (9-digits): ON FILE NOT ON FILE

Student School Accident Insurance: Yes No Other Insurance Provider: _____

Allergies (e.g., specific drugs, certain foods, insect stings, hay fever) Specify: _____

Reaction(s) to above? _____

Carries Epi pen? Yes No Carries Ana Kit? Yes No

Does this student have a URIS file? Yes No

Medical/physical conditions that may affect participation in the stated program/activity (e.g., recent illness or injury, chronic conditions, phobias, etc.). Be specific:

Specify the condition(s) and requirements for program modification or specific activities your child should not participate in:

Medication(s) taken (name, reason, dosage, storage, potential side effects/treatment of such):

Other Health/Medical/Dietary Concerns:

Emergency Contacts:

1) _____ Phone: (H) _____ (W) _____ (C) _____

2) _____ Phone: (H) _____ (W) _____ (C) _____

Parent/Guardian's Signature: _____ Date: _____

Revised 13/April/08, Effective 30/August/08; Revised 26/May/09, Effective 30/August/09

*This page to be retained by school and teacher-in-charge**

N.B. **Teacher-in-charge: this information is confidential and must be treated as such when in your possession.*

The personal information contained on this form is collected and protected under the authority of the Public Schools Act, The Education Administration Act, the Freedom of Information and Protection of Privacy Act (FIPPA) and the Personal Health Information Act (PHIA), and will be used and disclosed for the purpose of participating on school trips. I understand that any other collection, use or disclosure of this personal information will not be permitted without my consent, unless authorized under FIPPA and PHIA. If you have any questions or concerns about the collection of this information, contact the Access and Privacy Officer at the St. James-Assiniboia School Division, 2574 Portage Avenue, Winnipeg, MB R3J 0H8, telephone (204) 888-7951.