

# **CONNELLSVILLE AREA SENIOR HIGH**

## **Physical Consent Form**

\_\_\_\_\_  
Student's Name

Dear Parent/Guardian,

The Pennsylvania School Health Law requires medical exams for children in Pennsylvania upon original entry to school, 6<sup>th</sup>, and 11<sup>th</sup> grades.

This exam may be done at school, by the school doctor with your consent, or it may be done by your family physician, at your expense, and recorded on a form provided by the school.

The school physician will be examining eleventh grade students during the months of October/November. Over the summer many of you will be getting physical exams from your private physician for summer camps, work permits, driving permits, etc. A special form must be obtained from the school nurse for your private physician to complete. You are responsible to return the completed form to the school nurse.

Thank you,  
Vicki Snyder, R.N.  
School Nurse 724-626-4060

### **PLEASE CHECK:**

\_\_\_\_\_ Please examine my child at school.

\_\_\_\_\_ I will arrange for the medical exam with my child's physician and understand I am responsible to return the completed form to the school nurse.

\_\_\_\_\_  
Signature of Parent

\_\_\_\_\_  
Date

**THIS CONSENT FORM MUST BE RETURNED TO THE SCHOOL NURSE AS SOON  
AS POSSIBLE .**