

**2016/2017
STUDENT FORMS CHECKLIST**

Dear Parent / Guardian:

The following forms must be on file at the TEC office by the first day of school. Please check the list below to verify that all forms have been completed and returned:

- Emergency Identification and Contact Form **1** – **FILL OUT BOTH SIDES**
- Required Signatures Consent Form **2** – **INITIAL AND SIGN SIDE 2**
- Everything Technology **3** – **READ GUIDE, STUDENT AND PARENT SIGN PAGE 9**
- Permission to Administer Acetaminophen or Ibuprofen **4**
- Medication Order signed by Parent and Doctor (if applicable) **5**
 - Applicable for medication administration during school hours.
 - The written medication order form should be taken to your student's licensed prescriber (your student's physician, nurse practitioner, etc.) for completion and returned to school.
 - This order must be renewed at the beginning of each academic year and as needed.
- Physical on record within the last year (*signed by student's physician)
- Up-to-Date Immunizations (*signed by student's physician)
- Vision & Hearing Screenings:
 - **Every year** for students Grades K-5, **once during:** Grades 6-8 **and** Grades 9-12.
 - If your physician does not perform these screenings, please submit a report from the specialist that completes the screenings.

Please return all forms in the envelope provided, which is self-addressed as follows:

The Education Cooperative
141 Mansion Drive, Suite 200
E. Walpole, MA 02032
Attn: Stephanie Beaudoin

You may also fax your forms to fax number: 508-660-1124, Attn: Stephanie Beaudoin

Medical forms from a Health Care Provider may be faxed directly to
Kerry Kubera, RN, School Health Services Leader
Dedicated confidential fax number: 508-660-1106
Tel. 781-326-2473 x729

Important: Registration is complete when we receive these forms. If you have any questions please contact: Kerry Kubera, RN, School Health Services Leader