

# Monmouth County Vocational School District

2003 No Child Left Behind Blue Ribbon School

Brian D. McAndrew, Ed. D.  
Superintendent

Timothy M. McCorkell  
Assistant Superintendent

Rosemarie Kindon  
Business Admin. / Bd. Sec'y

## High Technology High School

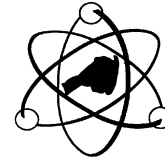
P.O. Box 119

Lincroft, New Jersey 07738 - 0119

Phone 732 / 842 - 8444

Fax 732 / 219 - 9418

<http://www.hths.mcvsd.org>



Daniel D. Simon, Sr.  
Principal

### Annual Health Information Update Form: Confidential

Student's Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

List any **health conditions** that your child has \_\_\_\_\_

\_\_\_\_\_

List any **medications** that your child takes:

At home \_\_\_\_\_

At school \_\_\_\_\_

Allergies (describe agent and reaction)

Describe Reaction

Bee Sting	_____	_____
Medicine	_____	_____
Food	_____	_____
Contact Substances	_____	_____
Environmental (dust, pollen...)	_____	_____
Latex	_____	_____
NONE	_____	_____

Family Physician \_\_\_\_\_ Phone \_\_\_\_\_

Note: Your child's health information will be shared with other educational staff and emergency care personnel on an as needed basis for health, safety and educational purposes.

Note: If there are any circumstances that you feel may impact your child at school feel free to call and share this information with the school nurse or counselor.

The Annual Health Information Update Form will be kept in a locked filing cabinet in the nurse's office.

Parent / Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_