

Newton Hill Community School
Leeds Road, Newton Hill, Wakefield
WF1 2HR
Tel: 01924 303680
Headteacher: Mrs Caroline Wheatley

www.newtonhill.wakefield.sch.uk

e-mail: admin@newton-hill.org.uk



MEDICAL FORM

It is important that we keep accurate medical records for every child in school. Could you please complete and return this form so that our records can be kept up to date.

Thank you.

Child's Name: _____

Class: _____

Please list any medical conditions and medication taken:

Does your child wear glasses?

YES/NO

If yes, please state if needed for close up work, board work or both

Does your child need an inhaler in school?

YES/NO

If yes, please state when it is needed the dose

Is your child allergic to plasters?

YES/NO

Does your child have any allergies?

YES/NO

If yes, please state any medication required.

Does your child have any food allergies?

YES/NO

If yes, please state any medication required.

Please note that the school would require a letter from the GP as confirmation of a nut allergy.