

The Episcopal Day School of Evergreen

Checklist

1. ____ Parent Manual – Policies and Procedures. Read and Understood
2. ____ Statement of Health Status
3. ____ Emergency Health Care Authorization with Hospital of Choice
4. ____ General Appraisal Form filled in & signed by Health Care Provider
(Top portion of the form filled in and signed by parent/guardian)
5. ____ Immunization Record – (Parent/guardian cannot fill out this form.)
(Please request for an Exemption Form for you to fill out and sign if your child is exempted from immunizations.)
6. ____ Personal History
7. ____ Developmental History
8. ____ Pick Up Authorization Form
9. ____ Child Abuse Reporting Form
10. ____ Permission to Participate
11. ____ Permission to be Photographed
12. ____ Facebook Release
13. ____ Permission to be included in the Directory Form
14. ____ Moisturizing lotion/Sunscreen/Diaper Ointment Form
15. ____ Emergency Treatment Form (if applicable) for any/all of the following:
Allergy, Asthma, Seizures, Other (Please request form)
16. ____ Authorization for Medication Administration in the School Setting (if Applicable)
This form must accompany any treatment form. (Please request form.)
17. ____ Supplies (from Supply List)
18. ____ Extended Care Contract (if applicable)

If you need to request a form, please call the office at 303-674-9253 or email Jerri Avery, RN, the EDSE Nurse Consultant, at jerri@edse.org

Please initial each item and sign below. The State of Colorado requires that all forms be completed *before* your child may attend class/child care.

Signature

Date