



SAINT DOMINIC SCHOOL
HEALTH FORM
Debe llenarse cada año

SCHOOL YEAR: 20____-20_____.

Student's name : _____

Father's name: _____

Mother's name: _____

In case of emergency contact: Name	Relation to the student	Phone numbers
#1.		
#2.		
#3.		

Family doctor: _____

Phones: _____

Clinic address: _____

General condition of the student:

Healthy () Sick ()

Rh y Blood Type: _____

Disease or health conditions that the student suffers:

Obesity () Epilepsy () Fractures ()

Diabetes () Allergies () Asthma ()

Headaches () Otitis () Stomach problems ()

Ulcers () High Blood Pressure () Low Blood Pressure ()

Sleep disorders () Eating disorders () Spine/arms/feet problems ()

Others: _____

Medicines to which the student is allergic: _____

Special care required from school: _____

Medicines to be administered in school: _____

Please hand in doctor's prescriptions and medicines to the nurse.

Diseases that the student has suffered in the past:

Chicken pox () Measles () Hepatitis ()

Rubella () Mumps () Gastritis ()

Others: _____

Explain: _____

Surgeries: _____

Accidents and Consequences: _____

Sight: Normal () Far sightedness () Short sightedness ()

Astigmatism () Does the student need glasses? Yes ____ No ____

Hearing: Normal () Hearing impairment in one ear () Hearing impairment in both ears ()

Difficulties in motor development: _____

Difficulties in language development: _____

Difficulties in the emotional or social development: _____

Difficulties shown in relation to learning skills: _____

Diseases in the family:

Asthma () Allergies () Diabetes ()

Epilepsy () Headaches () Heart disease ()

High / Low Blood Pressure () Kidney disease ()

Others: _____

Dear Parents or Tutors:

Please add any other information that you consider necessary to be managed by the school.

In case of an emergency:

- The school will contact the persons that you named in this form.
- The school will contact the family doctor that you provided only if the emergency requires it and if parents or tutors cannot be reached. Parents or Tutors are the first persons to be called in case of an emergency.
- The school director or nurse can collaborate if it is necessary to take the student to the hospital but parents or tutors must always get to the hospital as soon as possible. In this case, the Health Form will be handy.
- The closest hospital to school is Hospital Metropolitano Vivian Pellas. It is also in the list of hospitals accepted by the accident insurance of Saint Dominic School students.

Person who filled this Form: _____

Signature: _____

Date: _____