



Chandler Unified School District #80

Request for Medical Documentation – Seizure Disorder

Date:

Dear Parent/Guardian,

Attached are forms for your child for the upcoming school year. The forms attached are:

Check all documents that apply:

- Seizure Care Plan and Order for Prescribed Services to be completed by your licensed healthcare provider.
- Seizure Disorder History form to be completed by the parent/guardian.
- Activity Restriction form to be completed by the parent/guardian if no restrictions or completed by your licensed healthcare provider if there are restrictions.
- Other

Please contact the health office if your child requires prescription or over-the-counter medication during the school day, and the appropriate forms will be sent.

If you would like to request a meeting with the District Nurse regarding your child's healthcare needs, please let us know and a meeting will be arranged.

All completed paperwork and supplies needed to care for your child must be brought to school prior to your child's first day of class.

Please contact your school health office with any questions.

Thank you,