



Dear Parent,

Hari Om!

Sometimes we, the school team are bogged with precarious medical situation in connection with school children and find that their medical history is not shared with school by the parents and the school has faced medical emergencies. In this regard it has become imperative to furnish us with the following details regarding your ward at the earliest and oblige.

MEDICAL INFORMATION

Student's Name : -----

Admission No. : -----

Class/Section : -----

Date of birth : -----

Blood group : -----

Allergies, if any : -----

Any chronic disease / illness for which the child is on regular medication:

Past medical / surgical history: -----

----- (attach photocopy of prescription).

Does child suffer from breathlessness? -----

Signature Mother : ----- Date: -----

Signature Father : ----- Date: -----

(Dr. Abhijit Bose)
Principal