MONTGOMERY COUNTY SCHOOLS FIELD TRIP MEDICAL ROSTER

Send medical roster to nurse

Teacher/Sponsor/GroupName:	Dates of Field Trip:	Out of KY?	Date Approved:
	Destination:	Overnight?	Approved By:

Teacher/Sponsor Last	To Complete First	Health Condition	Meds @ school	Meds @ home	Can self administer	MD order to carry	Requires nurse	Requires UAP

Parent/Guardian Name and Contact Information & Field Trip Consent is the responsibility of the teacher/sponsor/coach. The nurse will notify of any conditions, medications or for the need of a UAP or nurse to accompany. The teacher/sponsor/coach is responsible to ensure that all needed medication/treatement supplies are with them and their students BEFORE leaving campus. for a trip.

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