

Pupil Onsite and Trip Medical Information Form

(for onsite and day trips only)

Pupil's Name		Da	Date of Birth		
		pil's Form Class			
Emergency contact 1:					
Name:		Relationship to pupil:		Phone number:	
Address:				Postcode:	
Emergency contact 2:					
Name:		Relationship to pupil:		Phone number:	
Address:			Postcode:		
Doctors Information:				I	
Name of Doctor:			Phone number:		
Address:				Postcode:	
Medical Condition	Yes	No	What should we look out for? What should we do? e.g. medication, call parents		
Medical Condition	Yes	No	What should we look out for? What should we do? e.g.		
Asthma			inedication, can pa	iens	
Allergies					
Anaphylaxis					
Diabetes					
Epilepsy					
Travel sickness					
Severe headaches/ migraines					
Other					
Additional information		1	1		

Pupils may be administered the following medication with permission.

Please indicate the following treatment/medication that may be administered to your son/daughter. Authorised staff may give non-prescribed medication from the schools controlled stock with signed consent. Please circle as appropriate. Staff may refuse to administer medicine if they deem it is not the best course of action.

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Paracetamol tablets/solution (Aged 10 or below 250mg, Aged 10+ 500mg)	Yes/No						
Calpol Infant Suspension 2+ months (as directed on box)							
Piriteze Syrup (Aged 6 - 12 up to 5mL/5 mg, Aged 12+ up to 10mL/10 mg of Cetirizine hydrochloride) (Allergy / hayfever relief) or Piriton Syrup (Aged 2-6 years 2.5mL/1mg of Chlorophenamine maleate							
Antiseptic wipes	Yes/No						
Plasters	Yes/No						
Sun protection lotion (spray)	Yes/No						
Antihistamine cream	Yes/No						
Parents or Guardians are encouraged to administer medication outside of school hours where possible, if necessary staff may aid in the administration of prescribed and non-prescribed medicines with signed consent. Please complete a Request to Administer Medication in School form under these circumstances.							
For Nursery and Infant Pupils Only:							
If my child has a toileting accident, or requires help with personal care, I am happy for staff to assist my child with cleaning and changing. Children's clothes may also be changed if they become wet or very dirty following a messy lunch. Yes/No							
Are there any foods you do not wish your child to eat for religious reasons? Please be participate in cooking and tasting activities and have birthday cakes sent in by other							
When was your child's last anti-tetanus injection?							
Consent							
I authorise members of staff to approve such medical treatments as deemed nece emergency.	essary in an						
I undertake to inform the school in writing as soon as possible of any changes to provided above.	the information						

Privacy Statement -please visit our School website for a full copy of our Privacy Policy.

Parent/Guardian's Signature_____

The pupil medical form will be processed by our internal administration team. The information collected will be processed, stored and treated as confidential personal information in respect of the General Data Protection Regulations (GDPR.)

The information collected will be used for the purposes of safeguarding pupils' welfare and providing appropriate pastoral (and where necessary, medical) care, and to take appropriate action in the event of an emergency, incident or accident, including by disclosing details

Date____

of an individual's medical condition or other relevant information where it is in the individual's interests to do so: for example for medical advice, safeguarding, to caterers or organisers of school trips who need to be made aware of dietary or medical needs

Data captured in this form will be stored using the School's information management system (iSAMS). A copy of this form will be retained and made available to relevant staff to reference for medical queries relating to the pupil. Data will not be shared with any third party without prior consent (unless authorised to do so by law.)

Medical forms will be form part of the pupil's record and will be retained for the duration of the pupils' education at St John's College, and will be kept for no longer than necessary and then destroyed. This is usually for a period of from the child's date of birth +24 years, to allow for the consideration and resolution of any disputes or complaints.

The school will comply with the rights of individuals as outlined in the current GDPR. These can be found at the following website: www.ico.org.uk

Any requests/ objections or complaints concerning data should be made in writing to the school's Data Protection Coordinator – Miss Nikki Thomas (HR Manager):- nthomas@stjohnscollegecardiff.com