

St. Thomas CE Primary School

A Voluntary Aided Church of England Primary School
Let your Light Shine in the Glory of God



Molyneux Road, Chequerbent, Westhoughton, Bolton, Lancashire BL5 3HP
Tel: (01942) 634666 Email: office@st-thomas.bolton.sch.uk

On the school's Pupil Data Base we need to update medical details. To assist us would you please complete the form below and return it to school

Name of Child: _____ Class: _____

Asthma				
Suffers from asthma	Yes/No	Occasionally		
Uses an inhaler	Yes/No	At home/daily	At school	
Inhaler is to be kept in school	Yes/No	If yes please state type and when it is to be used		
Glasses				
Wears glasses	Yes/No	All the time	For reading/writing	For long distance
Additional information				
Speech				
Attends speech therapy	Yes/No	Has attended	Still attending	
Additional information				
Hearing				
Has hearing problems	Yes/No	Wears an aid		
Additional information				
Allergies	Please state details if any:			
Does School have your permission to seek Emergency Medical Treatment if necessary? Yes / No				

Is there any other medical/physical condition that you think may affect your child's education that we at school need to be aware of? Yes/No
(If yes, please give details below)

Thank you for taking the time to complete this form. It does help us to keep our school records up to date, and this is essential.

#Signed(Parent/Guardian) Date.....
(# Please note that this form must be signed by someone who has parental responsibility as defined by the Children Act 1989)

