

THE JANNALI HIGH SCHOOL
CHANGE OF INFORMATION FORM

Date of changes:

Student's surname:	Given name:
Current address:	
Previous address:	
Date of birth:	Home Phone:

Father/Guardian's full name:	
Address (or as above):	
Occupation:	
Work phone:	Mobile:

Mother/Guardian's full name:	
Address (or as above):	
Occupation:	
Work phone:	Mobile:

Contact person if parents/guardians unavailable	
Name:	
Relationship to family:	Phone:

Medical history (allergies, please specify):

Medical problems/medication (please specify):

Any other problem that your child may have that could affect their schooling:

Prescribed Medication

Parents must inform the school in writing of their child's need to take medication. Note must state name and class of student, dose, duration of treatment and time of day to take the medication. If you know of any concern about possible side effects, please include that information also.

The medication for the day is to be left at the office in the morning.

All medication must be taken under supervision at the office, so make sure the medication has the student's name, dose and time to be taken on the container.

Analgesics and other over-the-counter drugs – these will not be administered by school staff. Students are not to bring these drugs to school. If they do so, the drugs will be taken from them and stored in the office area until the end of the day when they will be returned to them and parents advised of the confiscation. Parents who wish their children to use these drugs will be required to administer them personally.

Father/Guardian's signature:
Mother/Guardian's signature: