



NEW ROAD SCHOOL

3071 BORDENTOWN AVENUE

PARLIN, NJ 08859

TEL: (732) 238-7700 FAX: (732) 238-7868

Dear Parent/Guardian,

If your child has an allergy to food or latex it is important that the school be aware of what reaction to look for in case of exposure. Please fill out the form below.

My child_____ is allergic to:

Below is a list of allergic symptoms. Please check all that apply to your child if they are having an allergic reaction to a particular irritant.

Rash_____

Swelling_____

Itchiness_____

Trouble breathing_____

Hyperactivity_____

Stomach Upset_____

Headaches_____

Diarrhea_____

List any other symptoms_____

Can your child be in the same room with someone who is eating this food?

Yes_____

No_____

Can your child touch this food without having a reaction as long as they don't eat it?

Yes_____

No_____

Thank you for helping me care for your child.

Susan Engstrom RN CSN
School Nurse