Ohio Department of Education Division of Educational Services Early Childhood Education Section

Child's Health Information Form

Rule 3301-37-05 of the Administrative Code requires preschool programs to secure health information from a child's parent no later than the first day of attendance unless otherwise indicated.

Name of Child		Date of Birth		Name of Parent/Guardian
Height			Weight	
1,	Allergies (list all allergies affecting the child and any special precautions or treatments indicated for these allergies).			
2.	Medications (list all medications currently being administered to the child).			
3.	Chronic Physical Problems (li	ist all ch	nronic physic	cal problems affecting the child).
4.	History of Hospitalizations (list dates of all hospitalizations of the child).			
5.	Disease (list all diseases the child has/has had).			
Signature of Person Completing this Form Date				