

Sunscreen, Insect repellent, and Tick Removal Consent Form

Student Information:

Name:	Date of birth:
Grade/Level: School Year:	Teacher:
NYS Education Law allows students to apply or direct school staff members to apply FDA approved sunscreen and insect repellant products while at school/school sponsored events with written parent/guardian consent. Please send only non-aerosol products labeled with your child's name if you consent. If a student cannot apply or direct an adult to apply sunscreen or insect repellant, a licensed health professional must apply it and a provider order and written parent/guardian consent is needed. NYS Education Law allows registered nurses to remove tick(s) from a student with written parent/guardian permission. Prompt removal of an attached tick may help reduce the likeliness of contracting Lyme disease and other tick-borne illnesses.	
 □ I allow my child or directed adult to apply their own FDA approved sunscreen as needed. □ I do NOT allow my child or directed adult to apply their own sunscreen as needed. 	
☐ I allow my child or directed adult to apply their own insect repellent as needed.	
☐ I do NOT allow my child or directed adult to apply their own insect repellent as needed.	
☐ I give permission to the school nurse to remove tick(s) from my child.	
\square I do NOT give permission to remove tick(s) from my child and will pick up my child to remove the tick(s).	
Parent/Guardian Signature and Contact Information:	
Name:	Date:
Signature:	Phone:

Please submit form to the school health office or the main office when complete.