

Approved: 3/11/2020 453.4 Form

	Student Name:				Date of Birth:	
	School:				Grade:	
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EPIPENS & INHALERS ONLY:

☐May self-carry Epipen or inhaler. This student has been instructed in the proper use of thi
medication and is sufficiently responsible to self-administer.

☐May not self-carry inhaler or Epipen.