



## LiMai MONTESSORI ACADEMY

23377 GOLDEN SPRINGS DRIVE

DIAMOND BAR, CA 91765

(909) 860-4001

### Health Information Checklist

\_\_\_\_\_  
Student's Name

Please check if your child has, or has had, any of the following conditions. Use the reverse side of this form for any pertinent information related to the above-named child.

☐ allergy\_\_\_\_\_

☐ asthma

☐ appendicitis

☐ bronchitis

☐ chicken pox

☐ convulsions

☐ diabetes

☐ ear ache

☐ epilepsy

☐ fainting

☐ headaches

☐ heart trouble

☐ hernia

☐ influenza

☐ measles

☐ nose bleeds

☐ pleurisy

☐ rheumatic fever

☐ scarlet fever

☐ tonsillitis

☐ typhoid

☐ whooping cough

☐ other: \_\_\_\_\_

☐ surgery\_\_\_\_\_

☐ eye glasses/vision problems\_\_\_\_\_

☐ regularly prescribed medication\_\_\_\_\_

Purpose: \_\_\_\_\_

Is there any condition, related to your child, which we should be aware of?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parent/Guardian Signature\_\_\_\_\_ Date\_\_\_\_/\_\_\_\_/\_\_\_\_

**"We're building a better world – one student at a time"**