

Chancellor Academy

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Kevin McNaught / Executive Director • Christopher Pagano / Director

Dear Parent(s)/Guardian(s):

Below please find the new information form regarding your son/daughter's medical conditions, allergies and/or medications. This information/form will be kept ONLY in the Nurse's Office.

Please complete and return in the enclosed envelope. At any time if you wish to discuss the below, please call me at 973-835-4989x232.

Student Name: _____

Parent Name: _____

Phone No.: _____

Medical problem(s)/condition(s):

Allergies:

Medications:

Parent signature: _____

Sincerely,

Stacey Connolly

Stacey Connolly

B.S.N., R.N., C.S.N. - N.J.

Business Office

7 Industrial Road • Unit 203-A • Pequannock, New Jersey 07444

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