

380 EXHIBIT 1 ANIMALS IN SCHOOL - STUDENT ALLERGY INFORMATION

Date: _____

Dear Parent/Guardian:

(Teachers please address the following items in your introductory paragraph)

- ✓ *Type of classroom animal*
- ✓ *Benefits your classroom animal will have for students*
- ✓ *Explanation of who is ultimately responsible for the upkeep, safety and welfare of the classroom animal during school hours and during periods of time when school is not in session*
- ✓ *How much interaction the students will have with the animal*
- ✓ *Who should be called if there are any questions or concerns*

In order to ensure the safety of our students, please fill out the information below and return to the school office as soon as possible. A decision to have a resident animal in our classroom will not be made until every child has returned this form. Thank you for your time.

STUDENT ALLERGY INFORMATION

Student's Name: _____

Parent's Name: _____

- No, my child does not have any known allergies to animals.
- Yes, my child does have an animal related allergy.

My child has an allergic reaction to the following animal(s):
(Please be specific as to type of animal which causes the allergic reaction.)

Date

Parent/Guardian Signature