



# South Lyon Community Schools

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Special Services Office • 62500-B West Nine Mile Rd. • South Lyon, MI 48178 • (248) 573-8220 • Fax (248) 437-8438  
Linda M. Raye, Director of Special Services

## Allergy Emergency Plan Letter

Date

Dear (Parent):

You have indicated that your child has Allergies.

For school personnel to provide daily and emergency management of your child's (medical alert) at school, please complete the following forms:

1. "Allergy Emergency Care Plan for School" form requiring parent and physician signature.
2. "Allergy Emergency Care Plan for Transportation" form requiring parent and physician signature.
3. "Parent Questionnaire regarding Allergies" form.

Enclosed you will find the appropriate forms to complete and return to the school office.

It is the parent's responsibility to provide all prescribed medications to the school. Please be advised that you are responsible for annual updates and for changes as they occur throughout the year.

**If an emergency arises before receipt of an individual care plan, school district procedures regarding allergies will be followed.**

Prompt return of your child's information will assist us to respond more readily to your child's needs. Please return the completed packet to the school by \_\_\_\_\_.  
Date

Thank you,

School Principal/Designee  
School Name  
Address  
Phone #

**This information expires on the last day of each school year.**