

# MARANATHA CHRISTIAN ACADEMY

## CONSENT LETTER FOR BATHROOM/PERSONAL ASSISTANCE

Parents/Guardians,

Should your child not be fully independent in cleaning and changing their clothes in case of bladder or bowel accident, vomiting or food/water spills:

I attest that – INITIAL one :

\_\_\_\_\_ The School Nurse or delegate staff member has my permission to assist my child when using the bathroom or changing their clothing if needed.

\_\_\_\_\_ The School Nurse or delegate staff member does not have my permission to assist my child in the bathroom in which case Parent or Guardian will be contacted and asked to come to the school to assist the student.

STUDENT NAME \_\_\_\_\_ DATE \_\_\_\_\_

Parent / Guardian name (print) \_\_\_\_\_

Parent/ Guardian signature \_\_\_\_\_

If you have any questions, please contact the Health Office.