



RANTOUL TOWNSHIP HIGH SCHOOL

200 S. SHELDON STREET
RANTOUL, ILLINOIS 61866

Megan Anderson

Assistant Superintendent
Eagle Academy Principal

Brooke A. Billings

Principal

Jenna Flessner

Dean of Students

Chris Dryer

Athletic Director

Dear Parent/Guardian,

The health care forms you submitted for your student indicated he/she has a food allergy.

To plan for and provide safe care for your child in the school setting, we will need the following:

- A signed letter from health care provider with instructions the school is to follow in the event that your student experiences an allergic reaction while at school. You may elect to fill out and return the enclosed **Food Allergy Action Plan (GOLD SHEET)**.

- Epinephrine auto-injector, if prescribed (e.g., EpiPen, Twinject), or other medication to be used if an allergic reaction occurs. Please complete the **Self-Administration Medical Authorization form (Blue sheet)** return it along with a ***spare EPIPEN** to the school.

* Will be kept in nurses office for backup.

- A signed **Annual Physician's Statement for Students Requiring Menu Modifications or Substitutions during the School Day form**.

Your speedy attention to the above matter is appreciated. We would welcome an opportunity to meet with you to discuss your child's allergy and how we can implement a personalized health management plan.

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