THE INDIANA ACADEMY
FOR SCIENCE, MATHEMATICS, AND HUMANITIES

2020-2021

HEALTHCARE CONSENT FORM

Student's Legal Name: ____ **Goes By:** ____________________________

STUDENT INFORMATION: Residential & Non-Residential Students

Grade Level: _____ 11th _____ 11th NECP _____ 11th International
_____ 12th _____ 12th NECP _____ 12th International _____ Other (specify) ______________________

Gender: _____Male _____Female Student Cell Phone #: (______) __________ - ____________

DELEGATION OF AUTHORITY TO CONSENT TO HEALTHCARE – Residential & Non-Residential Students

(Consent for healthcare services, as necessary, in the absence of the parent/guardian)

Student/Minor Children Information:

Student Name (s)	Date of Birth	Allergies	Special Medical Problems
Other Minor Children Name (s)	**Date of Birth**	**Allergies**	**Special Medical Problems**

I, the parent/guardian, of the above named children, hereby delegate authority to consent to health care in my absence (pursuant to IC 16-36-1-6)

TO:

The Indiana Academy for Science, Mathematics, and Humanities/Ball State University
Ball State University – Wagoner Complex – 301 N. Talley – Muncie, IN 47306 – (765) 285-8125

FROM:

June 1, 2020 to July 1, 2021

Parent/Guardian Signature (s):

Parent Name (1): ______________________________________ (2): ______________________________________

Address: ______________________________________ ______________________________________

City/State/Zip: ______________________________________ ______________________________________

Signature (s): ______________________________________ ______________________________________

Date: ______________________________________ ______________________________________

Witness Signature:

Witness Signature: ______________________________________

Address: ______________________________________

City/State/Zip: ______________________________________

The parent/guardian is responsible for all student medical expenses incurred while at the Indiana Academy for Science, Mathematics, and Humanities

CC: Tina Brinkman, RN/Nikki Al Khatib, RN