

PITMAN SCHOOL DISTRICT

Date: _____

Dear _____,

Your request for the selection of a delegate to provide emergency care to _____ has been completed.

A delegate has been chosen for the school year _____. The lay-person employee of the Pitman Board of Education is _____.

This individual has agreed to be trained in the administration of a *Glucagon* and to assume the responsibility of providing the care needed when the training has been completed.

You have the responsibility and right to agree or disagree with the selected delegate.

Please sign and return the lower portion of this letter to me as soon as possible with the option you prefer.

Thank you,

School Nurse

____ I/We agree to and request that _____, administer, in an emergency situation, *Glucagon* to our child _____.

____ I/We do not agree to the chosen delegate _____, to administer *Glucagon* to our child _____. Please select another delegate.

Parent/Guardian Signature

Parent/Guardian Signature