

**MONTESSORI CHILDREN’S CENTER of ALLEN PARK**

313-382-2777 . 313-386-8508

[www.montessorichildcenter.com](http://www.montessorichildcenter.com)

**SICK CHILD POLICY**

We love to see your child every day; however, if they are sick we request you please keep them home.

\* We will not accept a child for care if he/she has recently vomited, has a fever of 100 degrees or higher, diarrhea, or profuse discharge from eyes, nose or ears. All are signs of infection and the child is contagious.

\* Children sent home with any of the above symptoms may not return to school the next day. They must be free of all signs of illness, **without fever reducing medication**, for a minimum of 24 hours.

The Michigan Department of Health has set guidelines which we must follow and requires that we report all cases of contagious diseases.

Please refer to your Parent Handbook for further information and/or clarification.

Thank you for abiding by this policy and helping keep our children healthy.

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Parent Signature

Date

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**MEDICATION RELEASE FORM**

Medication shall be given or applied ONLY with written permission from the parent. Staff will administer medication only when specific dates are indicated; open ended or “as needed” requests cannot be honored.

Sunscreen, provided by the parent and labeled with the child’s name, however, may be applied as directed on the original sunscreen container without further written permission by the parent.

Prescription medication shall be in the original container and have the pharmacy label indicating the physician’s name, child’s name, instructions, and names and strength of the medication and shall be given in accordance with those instructions. We will not follow any instruction from a parent which contradicts the instructions of the physician as stated on the prescription label.

Nonprescription/over the counter medication will not be administered by the staff unless it is prescribed by a physician and labeled as such (see above).

Medication is to go home each night.

Please sign, date and return this form with your child’s application for admission.

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Parent Signature

Date