



Saint Raphael School

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Allergy Aware Policy
Active acknowledgement sign-off

September 8, 2016

Dear _____:

Please sign this acknowledgement that you read and understand our Allergy Aware Policy. In addition, please check the line next to any of the following statements that you mandate for your child

Cafeteria: Please check one or the other; not both

They are allowed to sit with students whose lunches may contain allergens

They sit every day in the Allergy Aware section of the cafeteria

Classroom/school: Please check one or the other; not both

They can sit with students whose snacks may contain allergens

They sit separated from classmates who may be bringing in snacks containing allergens

Middle School Students only

They will carry Epinephrin Pen with them at all times

Thank you.

Family member _____ Date _____

Family member _____ Date _____