

**Sunscreen Parent Permission for Use at  
School/School Sponsored Events**

**To Be Completed by Parent- Valid for 1 Year**

Student Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Grade: \_\_\_\_\_ Teacher/HR: \_\_\_\_\_ School: \_\_\_\_\_

To reduce the possible overexposure to sun NYS Education Law allows students who can apply or direct school staff members to apply FDA approved sunscreen products to carry and use them at school/school sponsored events with written parent/guardian consent.

If your student **CANNOT** apply or direct an adult to apply sunscreen for them, whether his/her own sunscreen or school provided sunscreen, **then we are legally not able to apply the sunscreen to your child.**

The name of the school provided sunscreen product is: SunX 30+ Broad Spectrum

My student **CAN** apply sunscreen by themselves or direct an adult to apply sunscreen for them

- ☐ I allow my child or directed adult to apply his/her **own** FDA approved sunscreen, as needed.
- ☐ I allow my child or directed adult to apply the **school provided** FDA approved sunscreen listed below as needed. An application of school provided FDA approved sunscreen Sunx 30+ Broad Spectrum will be applied to exposed skin every 4 hours as needed to protect against overexposure to sun.

**Parent/Guardian Signature and Contact Information**

<b>Name:</b>	<b>Date</b>
<b>Signature:</b>	<b>Phone</b>

**As always, we appreciate your help and support in keeping the kids healthy and safe. Please return this completed form to the health office as soon as possible. Thank you.**

Brandy Kelley, RN/School Nurse