

Parents: Please complete the following form for your child and have your child give it to the Big Learning teacher on the first day of classes. Please email a copy to the Big Learning teacher and science@biglearning.org for S&E and fles@biglearning.org for FLES. Please include the name of your child and the Big Learning Parent Allergy/Asthma Plan in the email.

Big Learning’s Parent Allergy/Asthma Plan

Child’s Name: _____
Date of Birth: _____
Grade Level: _____
School Name: _____



INSPIRING CURIOSITY

Identify and Explain Allergy/Asthma:

Parent’s Name: _____
Cell: _____
Work: _____
Home: _____

How to tell if my child is having an allergic reaction or asthma attack:
What to do if my child has an allergic reaction or asthma attack:

Epi-Pens stored in MCPS Health Rooms and Offices are NOT available before or after school hours. If your child may need an Epi-Pen you must send the Epi-Pen and Allergy plan with your child to each Big Learning class.