

West Virginia University Institute of Technology
Camp STEM

Health Statement

Name of Student _____ Age _____ Sex _____

List below any health conditions that West Virginia University Institute of Technology Staff should be aware of (reporting these conditions will not prevent the individual from attending Camp STEM and will be kept confidential by the staff)

Allergies (explain) _____

Drug allergies _____

Diabetes Heart Condition Convulsions Emotional Upsets Ear Conditions
Asthma Lack of Coordination Other _____

Immunizations: Oral Polio Tetanus

Medications taken at this time _____

Activities individual should not participate in _____

Signature of parent/guardian _____

Individuals requesting an accommodation because of disability should contact Dr. Kimberlyn Gray at 304.929.1652 by June 9.