



**Maplewood Clinic
Authorization for Treatment 2023-2024**

Name of Student

Address

Grade

Date of Birth

Maplewood Clinic has contracted with Summa Health System to provide a Nurse Practitioner at the Clinic during the 2023-2024 school year. I authorize the Nurse Practitioner to provide a general health screening, history and physical, evaluation for minor injury and first aid care, or problem-based care to the above-named student during the 2023-2024 school year.

If indicated, I authorize the Nurse Practitioner or other appropriate staff to perform:

- COVID-19 test
- Urine dip stick to test for urinary tract infection
- Throat culture for Strep

I will notify the school or Maplewood Clinic immediately if there is any change in this authorization.

Signature of Parent/Guardian

Cell phone number

Date

Signature of Student

Date