

# INSTRUCTIONS

## ONLINE LAKELAND CENTRAL SCHOOL DISTRICT AUTHORIZATION FOR SPORT PARTICIPATION FORM THE ONLINE FORM **MUST BE COMPLETED** BY THE PARENT/GUARDIAN.

1. GO TO THE ONLINE SPORTS CERTIFICATION PROCEDURES WEB PAGE.
2. CLICK ON THE YOUR CHILD'S SCHOOL LINK TO THE FORM FOUND AT THE TOP OF THE PAGE.
3. TYPE YOUR (**PARENT**) FIRST AND LAST NAME
4. TYPE STUDENT NAME - **YOU MUST TYPE THE STUDENT NAME EVEN THOUGH IT STATES OPTIONAL**
5. TYPE YOUR EMAIL ADDRESS. ALL COMMUNICATIONS (EMAILS) WILL BE SENT TO THE ADDRESS YOU PROVIDE.
6. **ONCE YOU SUBMIT YOUR ONLINE FORM YOU WILL RECEIVE A CONFIRMATION EMAIL FROM FORMS@INFORMEDK12.COM.** IF YOU DID NOT RECEIVE THE CONFIRMATION EMAIL FROM FORMS@CHALKSCHOOLS.COM, PLEASE **CHECK YOUR SPAM FOLDER.** ALSO, IF THE SCHOOL NURSE NEEDS TO CONTACT YOU, IT WILL BE DONE BY EMAIL.

The screenshot shows the Chalk website interface for the Lakeland Central School District authorization form. The top navigation bar includes the Chalk logo and a 'Need help? (929) 32-CHALK' link. The main content area is divided into two sections. The left section is a form with the following fields: 'Your full name / Su nombre completo' (with a blue box labeled '2'), '(optional) Student name / Estudiante' (with a blue box labeled '3'), and 'Your email (enter to receive confirmation of submission)'. A blue button at the bottom of this section reads 'Go to form / Ir al formulario' (with a blue box labeled '4'). The right section is a preview of the 'LAKELAND CENTRAL SCHOOL DISTRICT AUTHORIZATION FOR SPORT PARTICIPATION' form, which includes a table with columns for 'Question' and 'Yes/No'.

7. COMPLETE FORM.

**NOTE:** YOU MUST PROVIDE RESPONSES TO ALL REQUIRED FORM FIELDS BEFORE YOU CAN SUBMIT THE FORM.

8. STUDENT’S MOST RECENT MEDICAL DOCUMENTATION CAN BE ATTACHED. SCROLL TO THE BOTTOM OF THE FORM AND CLICK ON THE “ADD ATTACHMENT” BUTTON.

- IT MUST BE STAMPED AND SIGNED
- IT MUST BE IN A PDF FORMAT – NO IMAGES WILL BE ACCEPTED

9. CLICK ON THE **RED** SUBMIT FORM BUTTON.

The screenshot shows a web form on the Chalk platform. At the top, it says 'Fill out: LAKELAND CENTRAL SCHOOL DISTRICT AUTHORIZATION FOR SPORT PARTICIPATION 3'. Below this is a 'Save progress' button. The main form area is titled 'LAKELAND CENTRAL SCHOOL DISTRICT AUTHORIZATION FOR SPORT PARTICIPATION To be completed by parent/guardian ONLY.' It contains fields for Student Last Name, Student First Name, Date of Birth, Gender, Grade, Sport, Mother's Name, Work Tel. No., Cell No., Father's Name, Work Tel. No., Cell No., Email Address, and Second Email Address (optional). There is a section for 'Person to contact if parents are NOT available' with fields for Name, Relationship, and Tel. No(s). Below this is a note about final medical clearance and an 'ATHLETIC HEALTH HISTORY' section. This section contains a table of questions with 'Yes/No' columns. The questions include: 'Has a healthcare provider ever restricted his/her participation in sports for any reason?', 'Does s/he have Asthma?', 'Does s/he have Diabetes?', 'Does s/he have Insulin Pump?', 'Does s/he have Seizures', 'Does s/he have Sickle Cell?', 'Does s/he have medical conditions not listed? If yes, please provide details below', 'Does s/he take daily medications?', 'Has s/he ever passed out during or after exercise?', 'Has s/he ever become ill when exercising in hot weather?', 'Has s/he ever complained of chest pain, tightness or...', 'Has s/he ever had an injury to a bone, muscle or joint?', 'Does s/he have a life threatening allergy?', 'Does s/he have a life threatening allergy to tree nuts?', 'Does s/he have a life threatening allergy to peanuts?', 'Does s/he have a life threatening allergy to seafood/shellfish?', 'Does s/he have a life threatening allergy to latex?', 'Does s/he have a life threatening allergy to bees/insects?', and 'Does s/he have an allergy to medication?'. At the bottom right of the form is a red button labeled 'Submit form / Enviar formulario'.

10. **IMPORTANT INFORMATION ABOUT REQUIRED FORMS:** PLEASE NOTE THAT THE ONLINE REGISTRATION PROCESS DOES NOT CHANGE THE REQUIREMENT TO SUBMIT HEALTH AND MEDICAL INFORMATION DIRECTLY TO THE SCHOOL HEALTH OFFICE. THE STUDENT HEALTH EXAMINATION FORM, ALONG WITH THE AUTHORIZATION FOR MEDICATION ADMINISTRATION FORM (IF APPLICABLE), MUST BE FILLED OUT, SIGNED/STAMPED AND SUBMITTED BY THE DEADLINE OF EACH SPORTS SEASON. [http://www.lakelandschools.org/document\\_center/StudentHealthExaminationJune2015.pdf](http://www.lakelandschools.org/document_center/StudentHealthExaminationJune2015.pdf) .

**BLOOD PRESSURE MUST BE INCLUDED ON STUDENT HEALTH EXAMINATION FORM.**

**NOTE:** IF MEDICATION IS REQUIRED, THE APPROPRIATE MEDICATION ORDERS AND SELF-MEDICATION ORDERS MUST BE ON FILE IF INDICATED. ALSO, IF A STUDENT MAY REQUIRE MEDICATION DURING A SPORTS EVENT OR PRACTICE, THE STUDENT MUST HAVE ACCESS TO THAT MEDICATION. MEDICATION ORDERS MUST BE UPDATED EACH SCHOOL YEAR. [http://www.lakelandschools.org/document\\_center/authorization\\_medication\\_admin.pdf](http://www.lakelandschools.org/document_center/authorization_medication_admin.pdf)

11. AFTER PARENT/GUARDIAN SUBMITS THIS FORM...

- THEY WILL RECEIVE AN EMAIL STATING THE FORM WAS SUCCESSFULLY SUBMITTED.
- THE SCHOOL NURSE WILL REVIEW THE INFORMATION: VERIFY DATE OF PHYSICAL AND MEDICATION ORDERS (IF APPLICABLE).
- THE SCHOOL NURSE WILL...

SEND THE FORM TO THE CHIEF MEDICAL OFFICER FOR FINAL APPROVAL

**OR**

IF ADDITIONAL HEALTH CARE PROVIDER DOCUMENTATION IS NEEDED, THE SCHOOL NURSE WILL CONTACT THE PARENT/GUARDIAN VIA EMAIL.

12. IF YOU DID NOT RECEIVE EMAILS, PLEASE **CHECK YOUR SPAM FOLDER.** ALSO, IF THE SCHOOL NURSE NEEDS TO CONTACT YOU, IT WILL BE DONE BY EMAIL.

13. FOR MORE INFORMATION GO TO THE SPORTS CERTIFICATION PROCEDURES WEB PAGE ON THE LAKELAND CENTRAL SCHOOL DISTRICT WEBSITE AT

[http://www.lakelandschools.org/departments/interscholastic\\_athletics/online\\_sports\\_certification\\_procedures.php](http://www.lakelandschools.org/departments/interscholastic_athletics/online_sports_certification_procedures.php) .