## PAWNEE COMMUNITY UNIT SCHOOL DISTRICT #11



810 North Fourth Street, Pawnee, Illinois 62558

## **Scott Cameron**

Superintendent Phone: 217-625-2471

**Timothy R. Kratochvil**Jr. High/High School Principal
Phone: 217-625-2471

**W. Christopher Hennemann** Grade School Principal Phone: 217-625-2231 Steven L. Kirby Athletic Director Phone: 217-625-2471

## PRE-K FIELD TRIP PERMISSION SLIP

I give permission for		to
	Student's	Name
attend the field trip to		
with the	on	·
Signature of Parent/Guardian Date Signed		
T C T 1	1 1 .	
In case of emergency, I can be reached at		
		Phone Number
	1 .	
In case of a medical emergency i	•	
reached, I grant the Pawnee School	-	
the right to make a i	medical deci	sion for my child.
Signature of Parent/Guar	rdian	Date Signed

## MEDICATION ON FIELD TRIPS

Medications are not sent on field trips unless a specific written request (school form) is made by the parent and presented to the school 24 hours prior to the field trip. The parent must send the medication to school on the morning of the field trip and the teacher will keep it in a safe and secure place while on the field trip until such time as the child requires the medication. The medication will be given to the child to self-administer. The medication must be in the original bottle from the pharmacy along with a note stating your request for your child to take the medication at the given time.