### Series 5000 Students Application of Sunscreen

#### **APPLICATION OF SUNSCREEN IN SCHOOL**

The Eastford Board of Education (the "Board") permits the application of sunscreen by students within the Eastford Public Schools (the "District"), in accordance with State law. Specifically, notwithstanding the provisions of Connecticut General Statutes § 10-212a and the Board's policy and/or administrative regulations concerning the administration of medication in school, any student who is six (6) years of age or older may possess and self-apply an over-the-counter sunscreen product while in school prior to engaging in any outdoor activity.

For a student to apply sunscreen prior to engaging in any outdoor activity, the following elements must be met:

- 1. The student's parent or guardian must sign the Board's written authorization and submit the authorization to the school nurse; and
- 2. The student and the student's parent or guardian, where applicable, must comply with any individual school procedures concerning the possession and self-application of sunscreen in school.

The Board authorizes the Superintendent or his/her designee to develop administrative regulations to implement this policy.

Legal References:

Conn. Gen. Stat. § 10-212a

Administration of medications in schools, at athletic events and to children in school readiness programs

Public Act 19-60, "An Act Allowing Students to Apply Sunscreen Prior to Engaging in Outdoor Activities"

#### ADMINISTRATIVE REGULATIONS CONCERNING APPLICATION OF SUNSCREEN IN SCHOOL

The Eastford Public Schools (the "District") permits the application of sunscreen by students within the District, in accordance with State law and Board of Education policy and administrative regulations. Specifically, notwithstanding the provisions of Connecticut General Statutes § 10-212a and the Board's policy and/or administrative regulations concerning the administration of medication in school, any student who is six (6) years of age or older may possess and self-apply an over-the-counter sunscreen product while in school prior to engaging in any outdoor activity.

- A. For a student to apply sunscreen prior to engaging in any outdoor activity, the following elements must be met:
  - 1. The student's parent or guardian must sign the Board's written authorization and submit the authorization to the school nurse; and
  - 2. The student and the student's parent or guardian, where applicable, must comply with individual school procedures concerning the possession and self-application of sunscreen in school.
- B. Individual schools shall develop processes and procedures for the self-application of over-the-counter sunscreen in school by students age six (6) and older prior to engaging in an outdoor activity, which processes and procedures <u>must</u> include that (a) the student's parent or guardian must sign the Board's written authorization and submit the authorization to the school nurse and (b) a student may only apply sunscreen that belongs to and has been brought into school by the individual student; and may include the following:
  - 1. The location for self-application of sunscreen.
  - 2. The time during the school day and in school of self-application.
  - 3. The labeling of the sunscreen.

Adopted: 10/10/2019

# Series 5000

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Legal References:

Conn. Gen. Stat. § 10-212a

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Adopted: 10/10/2019

## Series 5000

#### Students Application of Sunscreen

#### **Eastford Board of Education**

#### WRITTEN AUTHORIZATION FOR THE POSSESSION AND APPLICATION OF SUNSCREEN IN SCHOOL

Name of Child:	_ Date of Birth:
Address of Child:	
Name of	
Parent(s):	
Address of	
Parent(s):	
(if different from child)	
· · · ·	s of age or older to possess and self-apply an over-the- or to engaging in any outdoor activity, with signed

I, \_\_\_\_\_\_, the parent/guardian of \_\_\_\_\_\_, Print name of student while in school prior to engaging in any outdoor activity. I understand and agree that the Eastford Board of Education assumes no responsibility or liability whatsoever with regard to the possession or application of the over-the-counter sunscreen, including but not limited to whether, or the manner in which, the sunscreen is applied; the expiration of the sunscreen; and/or any reaction the student may have to the application of the sunscreen.

Signature of Parent/Guardian

Date

Please return the completed original form to your child's school nurse.