

Smethport Area School District
414 South Mechanic Street
Smethport, PA 16749

Non-Aerosol Topical Sunscreen Use

Parent/Guardian Form

In October 2018, the Pennsylvania School Code was amended to include a section on Sun Protection Measures for Students. Section 1414.10 states that a school entity shall allow the application of sunscreen during school hours, at a school-sponsored activity, or while under the supervision of school personnel. Review the full legislation, which is available on the Pennsylvania General Assembly's website: www.legis.state.pa.us.

Parents/guardians may choose to supply their child with **non-aerosol topical sunscreen**, if it is approved by the U.S. Food and Drug Administration. Parents/guardians must complete and submit the following information in order for their child to apply sunscreen during school hours, at a school-sponsored activity, or while under the supervision of school personnel.

Student Name: _____

Grade: _____

School: _____

Date: _____

- ☐ By checking this box, you confirm that you are the parent/guardian of the student.
- ☐ By checking this box, you confirm that you understand that the school is not responsible for ensuring that the sunscreen is applied by the student.
- ☐ By checking this box, you confirm that the student has demonstrated that they are able to self-apply the sunscreen.

A school may cancel or restrict the possession, application, or use of a non-aerosol topical sunscreen product by a student if any of the following occurs:

- The student fails to comply with school rules concerning the possession, application, or use of the non-aerosol topical sunscreen product.
- The student shows an unwillingness or inability to safeguard the non-aerosol topical sunscreen product from access by other students.

If a school cancels or restricts the possession, application, or use of a non-aerosol topical sunscreen product by a student, the school entity shall provide written notice of the cancelation or restriction to the student's parent or guardian.

Parent/Guardian Signature: _____

Date: _____

PLEASE TURN OVER-BOTH SIDES NEED TO BE COMPLETED

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Student Form

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Parents/guardians may choose to supply their child with **non-aerosol topical sunscreen**, if it is approved by the U.S. Food and Drug Administration.

Students must complete and submit the following information so that they are able to apply sunscreen during school hours, at a school-sponsored activity, or while under the supervision of school personnel.

Student Name: _____ Grade: _____

School: _____

Date: _____

☐ By checking this box, you confirm that you know the proper method of self-applying the non-aerosol topical sunscreen product.

☐ By checking this box, you confirm that you know the proper safety precautions for the handling and disposing of the non-aerosol topical sunscreen product.

A school may cancel or restrict the possession, application, or use of a non-aerosol topical sunscreen product by a student if any of the following occurs:

- The student fails to comply with school rules concerning the possession, application, or use of the non-aerosol topical sunscreen product.
- The student shows an unwillingness or inability to safeguard the non-aerosol topical sunscreen product from access by other students.

If a school cancels or restricts the possession, application, or use of a non-aerosol topical sunscreen product by a student, the school entity shall provide written notice of the cancelation or restriction to the student's parent or guardian.

Please return this form to: _____

Student Signature: _____

Date: _____