



MEDICAL ALERT LIST (Optional)

Wheaton College Student Health Services annually provides the Director of Public Safety, the Dean of Students, the Dean On-Call, and the Area Coordinator On-Call with a Medical-Alert list.

This is a confidential listing of students with significant health conditions that assists first responders in providing prompt emergency care when required. It is strongly suggested that you participate in the Medical-Alert listing if you have a specific medical condition or health concern.

If you wish to be included on the Medi-Alert list, please sign below and return this form to Student Health Services.

I, _____, give Wheaton College Student Health Services permission to release information from my medical record to Wheaton College Public Safety Officers, the Dean of Students, the On-call Dean, and the On-call Area Coordinator for inclusion on the Medi-Alert list.

I understand that my name will remain on the Medi-Alert list while I attend Wheaton College.

Signature _____ Date _____

Wheaton ID # _____

Witness _____ Date _____