

# Hyperglycemia (High Blood Glucose) Treatment For a Student with Diabetes

Student's Name \_\_\_\_\_ Address \_\_\_\_\_ Date of Birth \_\_\_\_\_

School Name \_\_\_\_\_ Grade \_\_\_\_\_ Teacher \_\_\_\_\_

Mother/Guardian \_\_\_\_\_ Father/Guardian \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

