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Kansas City Art Institute  
PCAL  
4415 Warwick Blvd.  
Kansas City, MO 64111

KANSAS CITY ART INSTITUTE  
A four-year college of art and design

## MEDICAL INFORMATION FORM

Name of student \_\_\_\_\_

Are there current medical conditions of which we should be aware during the Student's stay on campus?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does the student currently take any prescription medication regularly? Living Center staff have instructions to confiscate medications they have not been informed of. Please list below.

\_\_\_\_\_  
\_\_\_\_\_

### All students should be up-to-date with their tetanus vaccinations

Physician's Information

\_\_\_\_\_  
Name Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Phone Fax