

A new policy to consider.

Students

Student Sunscreen Use

The Board of Education (Board) believes in promoting sun safety to ensure that children are protected from skin damage caused by harmful ultra-violet rays in sunlight. The Board believes that by encouraging sun safe behavior and teaching children about the risks of sunlight, they can be protected from skin damage and lessen the risk of skin cancer.

The purpose of this policy is to allow any student who is six years of age or older, to possess and self-apply an over-the-counter sunscreen product while in school prior to engaging in any outdoor activity, provided a written authorization is signed by the student's parent/guardian and is submitted to the school nurse. The written permission from an authorized health care provider is not necessary.

Implementing Procedures:

1. Students are allowed to carry and use sunscreen, during school hours, without a physician's note or prescription on school property or at a school-sponsored activity provided the student's parent/guardian has provided written authorization to the school nurse. *(See sample form)*
2. Students/Parents/Guardians are to provide the sunscreen product for school use. The sunscreen must be:
 - a. Clearly marked with the child's name.
 - b. Replenished by the parent/guardian as needed.
 - c. A product regulated by the U.S. Food and Drug Administration for over-the-counter use.
3. Aerosol sunscreens, as well as combined sunscreen and insect repellents are prohibited.
4. The District is not responsible for ensuring that the non-aerosol topical sunscreen product is applied by the student.
5. The sunscreen product is to be stored in the student's book bag/back pack or other location designated by the teacher.
6. Students are not to share sunscreen with other students.
7. The student must be able to apply his/her own sunscreen. ~~(or: The student has demonstrated to the parent/guardian that he/she is capable of self applying the non-aerosol sunscreen product.)~~
8. School personnel are not expected to assist students in the application of sunscreen.
9. Subject to the provisions of the dress code policy, students are allowed to wear articles of sun-protective clothing, including hats and glasses, when not in school buildings. Clothing that protects the skin should be worn, particularly for outdoor activities and school trips.

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Implementing Procedures: (continued)

10. It is recommended that the sunscreen used by students be a high factor sunscreen with a sun protection factor (SPF) rating of 15 or higher.
11. Parents/guardian of children with allergies or skin sensitivities should check with a health care provider before providing a sunscreen. (~~or: Prior to use at school, the sunscreen should be applied to the child at least once at home to test for any allergic reaction.~~)

Additional language to consider:

- ~~• The District will educate children through the health curriculum about the causes of skin cancer and how to protect the skin.~~
- ~~• Students should seek shade, particularly in the middle of the day and to use shady areas, where available, during breaks, lunchtimes, recess, and trips.~~
- ~~• Parents/guardians are encouraged to provide instruction to their children on the use of sunscreen.~~
- ~~• Families are encouraged to visit the Center for Disease Control's website to review the [sun safety tips for families fact sheet](#).~~

Revocation or Restriction of Permission to Use Sunscreen

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

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

When a school entity revokes or restricts the possession, application or use of a non-aerosol topical sunscreen by a student, a written notice of such action shall be provided to the student's parent/guardian.

(cf. 5132 – Student Dress Code)

(cf. 5141.21 – Administration of Medication)

Legal Reference: Connecticut General Statutes
P.A. 19-60 An Act Allowing Students to Apply Sunscreen Prior to Engaging in Outdoor Activities.

Policy adopted:
cps 7-19

Sunscreen Use Parent/Guardian Form
New Fairfield Public Schools

~~P.A. 19-60 allows school students, six years of age or older, to possess and self apply an over-the-counter sunscreen product while in school prior to engaging in any outdoor activity, provided a written authorization is signed by a student’s parent/guardian and is submitted to the school nurse.~~

~~The sunscreen must be non-aerosol and must be approved by the FDA for over-the-counter use for purposes of limiting ultraviolet light induced sun damage.~~

~~The Board of Education adopted policy #5141.214, “Student Sunscreen Use,” pertaining to this new legislation.~~

As a parent/guardian, I attest to the following:

- ~~• My child has demonstrated to me that he/she is capable of self applying the non-aerosol sunscreen product.~~
- ~~• I understand that I am responsible to provide the non aerosol sunscreen product for school use, clearly marked with my child’s name and replenished as needed.~~
- ~~• I understand that the _____ School District is not responsible for ensuring that the sunscreen product is applied by my child.~~
- ~~• I understand that my child is not to share his/her sunscreen product with other students.~~
- ~~• I recognize that school personnel are not expected to assist my child in the application of sunscreen.~~
- ~~• I understand that the school may revoke or restrict possession, application, and use of sunscreen by my child if my child fails to comply with school rules related to the sunscreen product or if my child shows an unwillingness or inability to safeguard the non-aerosol sunscreen product from access by other students.~~

Student’s Name: _____ Grade Level: _____ Teacher: _____

Parent/Guardian Name (printed): _____

Parent/Guardian Signature: _____ Date: _____

Please return this completed form to your child’s teacher or school nurse.