



Please Print clearly.

Student PID: _____

Student Name: _____

Student Date of Birth: _____

MEDICAL TREATMENT OF A MINOR

MSU University Health & Well-Being (UHW) provides medical care for students during their enrollment at Michigan State University. UHW offers preventive healthcare, treatment for illness or injury, and health education - all on an outpatient basis. Occasionally UHW's health care staff refer students for specialty services with other physicians within the MSU (medical school faculty), also outpatient basis.

When a student under 18 years of age seeks treatment at UHW, we generally seek parental consent prior to providing that treatment. (Certain circumstances, like medical emergencies, Michigan law does not require parental consent before treatment is provided.) It is sometimes difficult to reach the student's parent/guardian to obtain consent to treatment, which can be frustrating for the student waiting for care. For this reason, **MSU recommends that the following authorization be signed by a parent/guardian of students who will begin their studies at MSU before they turn 18.**

AUTHORIZATION FOR TREATMENT

1. I authorize medical treatment for the student named above from MSU University Health & Well-Being and other MSU outpatient health care facilities.
2. I understand that this authorization will be in effect until the student reaches age 18.

Printed Name of Parent/Guardian

Relationship

Signature Name of Parent/Guardian

Date

Emergency Telephone Number

Email, mail or fax this form to:

Medical Records Department
463 E. Circle Dr RM 146
East Lansing, MI 48824-1037
Email: UHW.medrec@msu.edu
Fax: (844)749-3315

Questions? Call Medical Records staff at 517-353-9153

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