

Parent or Guardian Request to Administer Medication in School

This form must be completed and signed by a parent/legal guardian.

- A new form is needed for all changes in medication, dose, or time.
- The medication should be brought to school by a parent/guardian or responsible adult.
- The medication container must be labeled by the pharmacy with the student's name, prescriber's name, name of medication, dosage, conditions for storage, prescription date, and expiration date.
- Unless otherwise specified, medication order is valid for the entire school year.
- Expired and discontinued medication not picked up by the last day of school will be destroyed.

INSTRUCTIONS FOR GIVING MEDICATION IN SCHOOL

Name of Student: _____ Date of Birth: _____ Grade: _____

Medication Name: _____ Dose: _____

Time/Frequency of administration: _____

Relevant side effects: None expected Specify: _____

PARENT/GUARDIAN AUTHORIZATION

I/We request designated school personnel to administer the medication as described above. I/We certify that I/We have legal authority to consent to medical treatment for the student named above, including the administration of medication at school. (I/We understand that at the end of the school year, an adult must pick up the medication, otherwise it will be discarded.)

Parent/Guardian Signature: _____ Date: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

For altered School Schedules, the following Medication Guidelines will apply unless you indicate otherwise in Writing:

- One hour late start: doses will be given as usual, with minor modifications in timing, if needed.
- Two hour late start: medications scheduled to be given before 10 a.m. will not be given in school; other doses will be given according to the prescribed schedule.
- Three hour early dismissal: medications scheduled to be given at lunchtime or later will not be given.

AUTHORIZATION FOR STUDENT TO CARRY EPI-PEN AND/OR INHALER

Parent/Guardian Signature: _____ Date: _____

TO BE COMPLETED BY SCHOOL

Date the form was received at school: _____ Received by: _____