INSTRUCTIONS FOR ADMINISTERING
MEDICATION

Parent’s instructions to the General Office regarding administering medication to children during the school day:

CHILD’S NAME: __________________________________________________________

CLASS: ________________________________________________________________

DATE: _________________________________________________________________

NAME OF MEDICATION: _________________________________________________

TIME DOSE IS TO BE ADMINISTERED: ----------------------------------------

AMOUNT TO BE ADMINISTERED: ---------------------------------------------

PARENT/GUARDIAN SIGNATURE: -----------------------------------------------

Medication Guidelines

All medication must be provided to the school in its original packaging, complete with the child’s name and dosage on the label, and manufacturer’s and/or pharmacist’s instructions clearly visible. The College will not administer or take responsibility for any medications, lotions or cream solutions etc. except on the written authority of the child’s parent or guardian. Unfortunately, Departmental guidelines do not allow us to accept verbal consent at any time.