

STUDENT HEALTH SERVICES EXHIBIT
Permission for the Use of Medications

The district strongly recommends that whenever possible, all medications, even non-prescription, be kept by the school nurse/teacher. **However, students may carry medications and self administer only if the following conditions have been satisfied:**

1. the following form is completed;
2. you have educated your daughter/son in regard to responsible usage of this medication;
3. the student is found to be responsible by school officials;
4. only a one day supply is carried, except for inhalers; and
5. if irresponsible use is noted, privilege will be rescinded.

.....
 Child's Name Birthdate Today's Date Medication Allergies

NON-PRESCRIPTION MEDICATION

PRESCRIPTION MEDICATION

1. Medication

- Dosage
- Time to be given
- Reason to be given
- Comments

1. Medication

- Dosage
- Time to be given
- Reason to be given
- Comments

 Student appears mature and responsible and self-medication is part of a therapeutic plan.
 Student was instructed in proper use and will carry and self-administer medicine.

 Please have school nurse store and administer medication.

.....
 Signature Of Parent/Date/Telephone #

.....
 Signature of Physician/Date/Telephone#