



Administration of Medicine

The school will only give your child medicine which has been prescribed by a GP or hospital doctor once this form has been completed.

It is a requirement to complete and sign this form, which must be handed to the office along with the medicine.

If your child has asthma, please also provide your child's asthma action plan. If you do not have an action plan from your GP, then please provide your own plan.

All medication must be in date and in its original packaging with the child's name on. We will not exceed the dosage stated on the instructions.

If a child needs medication during the day that is not prescription, where possible, it should be administered before they get to school and when they return. The headteacher reserves the right to refuse certain medication being administered by staff.

All medications will be kept secure; no medication should be in your child's bag.

DETAILS OF PUPIL

Surname _____

Forename _____

Class _____

Condition or illness _____

MEDICATION

Name of Medication (as described on the container) _____

Date Dispensed and Expiry Date _____

Dosage and method (how much and when) _____

When is it taken (Time of day) _____

Special Precautions (eg before or after food) _____

CONTACT DETAILS

Name _____

Daytime Telephone _____

Relationship to pupil _____

I understand that I must deliver the medicine personally to the office staff and accept that this is a service, which the school is not obliged to undertake. I also understand that it is not the responsibility of the school to ensure that the medicine is taken and that my child must remember to attend the office at the agreed time.

Parent Signature _____ Staff Signature _____ Date _____

Print Name _____ Print Name _____

To completed by office staff: Details entered on SP:	
Initials:	Date: