

BELMONT C OF E PRIMARY SCHOOL

Parental Agreement for Belmont C of E Primary School to administer medicine

Belmont C.E. Primary School will not give your child medicine unless you complete and sign this form – here at Belmont C.E. Primary School we have a policy that staff can administer medicine.

Date:	
Child's Name:	
Class:	

Name and strength of medicine:

Expiry Date:

How much to give (*i.e. dose to be given*):

When to be given:

Any other instructions:

Number of tablets/quantity to be given
to Belmont Infant School:

Note: Medicines must be in the original container as dispensed by the pharmacy

Daytime phone No. of parent or
Adult contact:

Name and phone No. of GP:

Agreed review date to be initiated by (*name of member of staff*):

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to Belmont C.E. Primary School staff administering medicine in accordance with the school's policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Parent's Signature: _____

Print Name: _____

Date: _____

If more than one medicine is to be given a separate form should be completed for each one.