

Himbleton Church of England First School

Administration of Medicine in School Form

To the Parent or Carer: The School will not give you child medication unless you complete and sign this form and the Head Teacher has agreed that the school staff can administer the medication.

The school will only administer medications prescribed by a GP and carrying pharmacist label, when dosages mean medicine is required during the school day. (whenever possible, medicines should be administered by parents/carers outside school hours)

Name of Child	
Address of Child	
Illness/Condition	
I understand that medication must be delivered to and collected from the office at the beginning and end of the day by an adult (i.e. NOT a child)	
I understand that the school will only administer medications prescribed by a GP and carrying a pharmacist's label, <i>and I accept that this is a service which the school is not obliged to undertake.</i>	
Medication Name/Type of Medication (as described on the container):	
Full Direction for use How long will your child take this medication? Dosage & Method: Timing: Special Precautions: Procedure to be taken in an emergency:	
Contact Details:	
Name of Parent/Carer:	Relationship to child:
Daytime Tel No:	
Signature:	Date:

