## **EMSCOTE INFANT SCHOOL**

## Consent for the administration of medication in school

Please note we are only allowed to give prescribed medicines in school.

In order for your child to be supervised during the administration of any medicines at school, the following information is required to be completed by the parent/guardian given to the office. If there are any subsequent changes in medicines or doses to be given, then these must be notified immediately to the school.

Name of Pupil: \_\_\_\_\_

Class: \_\_\_\_\_

Name of Medicine:

include full details as given on the container label issued by the pharmacist.

Name of Medicine	Dose	Frequency/Times	Date of completion of
			Course (if known)
Special Instruction:			

Date	Time given	Signature 1	Signature 2

Any prescribed medicine must be supplied to the school in a container clearly labelled (by the Pharmacist) with the name of the medicine, full instructions for use and the name of the pupil. All medicine should be in the original container bearing the manufacturer's instructions/guidelines. The school may refuse to administer any medicines supplied in inappropriate containers.

This form should be renewed by the parent/guardian if there are any changes to a pupil's medication.

 Parent/Guardian Signature:
 \_\_\_\_\_\_Date:

Name (Block Capitals):
 \_\_\_\_\_\_

Relationship to Child:
 \_\_\_\_\_\_\_