

## Medicines to be Taken Whilst in School

The Academy is unable to administer medication unless you complete and sign this form.

The Principal has agreed that school staff can administer medication prescribed by a doctor/hospital, but please be aware this is a service which the school is not obliged to undertake. Medication must be provided in the original container, showing the prescription label with your child's name on it.

<b>Child's full name:</b>			
<b>Year group and class:</b>		<b>Date of birth:</b>	

### Details of Illness and Medication:

<b>Nature of illness medication has been prescribed for:</b>	
<b>Does the prescribed medication relate to an illness or medical condition for which your child has a Health Care Plan in school?</b>	Yes / No
<b>Name of prescribed medicine:</b>	
<b>Date medicine was prescribed by a GP:</b>	
<b>Date your child started taking the medication:</b>	
<b>Length of the course of treatment:</b>	
<b>Expiry date of medication:</b>	
<b>Is the medication to be self-administered by your child?</b>	Yes / No

### Full directions for use:

<b>How much to give (i.e. dose):</b>	
<b>At what time(s):</b>	

### Declaration by Parent/Carer:

I undertake to supply the academy with medicines in properly labelled containers.

I understand that I must deliver the medicine personally to the Academy Office and accept that this is a service which the school is not obliged to undertake.

<b>Signature of Parent/Carer:</b>		<b>Date:</b>	
<b>Full Name of Parent/Carer:</b>			
<b>Contact number in case of query:</b>			

