

Dear Parent/Carer

Medication in School

1. Medication cannot be accepted at Daventry Hill School without complete written and signed permission from the parent or legal guardian.
2. If the student requires medication during the school day, please complete the form overleaf.

Medication can only be accepted if it has been prescribed by a doctor.

Each item of medication should be in its **original container and clearly pharmacy labelled** with the following information:

- Students name
- Name of medication
- Dosage
- Date of dispensing
- Expiry date
- Storage requirements (if important).

Short term pain relief medication e.g. paracetamol, can be administered only with written parental/guardian consent and must also contain the above information.

Allergies - It is also important to note any allergies your young person may have on this form.

If you have any questions or concerns about medical or health issues, please contact the school.

This form is to be returned to the school.

Kind Regards



Medication in School - Consent Form

To be completed by the Parent/Carer

Name of Student:

D.O.B.:

Name of Medication	Amount (eg.1tab / 5mls etc.)	Dose (Millilitres / Milligrams etc.)	Time to be given

Reason for Medication:

Allergies:

I give my consent for the administration of the above medication, by the designated person/s in school.

Parent/Carer Signature:

Print Name:

Date: