

The Hermitage School

Parental agreement for School to administer medicine



The school will not give your child medicine unless you complete and sign this form, and the school has a policy that staff can administer medicine.

Name of child:

Date of birth: Class:

Medical condition or illness:

Medicine

Name/type of medicine:

(As described on the container).....

Date dispensed: Expiry date:

Dosage & method:

Timing.....

Special precautions.....

Are there any side effects?

.....

Procedures to take in emergency:

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I accept that this is a service that the school is not obliged to undertake.

Signed: Date: