

ALWYN INFANT SCHOOL



REQUEST FOR STAFF TO GIVE MEDICATION

This Form must be completed each time a course of medicine, requiring a dose during the school day, is prescribed. Please ensure the medicine is clearly labelled with the contents, child's name and dosage. Medicines must be delivered personally by the parent/guardian to the Headteacher or the Administrative Officer.

We make every effort to ensure the child receives their medicine, but during the busy school day, this may prove difficult. Parents who wish to come into school to administer the dose themselves will be very welcome.

Medicines are kept in a secure place and should be collected by the parent/carer at the end of the school day from the main Reception.

I request that: _____ in Class: _____

Be given the following Medication: _____

_____ (Dosage) at: _____ time(s) during the day

Signed: _____ Date: _____
(Parent/Guardian)

For Office Use Only:

Date	Time	Staff Initials	Date	Time	Staff Initials