

## SHILBOTTLE PRIMARY

## Administration of Medication to Pupil Agreement between Parents/Carers and School

A parent must supply a written request in order for medication to be administered to pupils during school hours. It is only possible to administer medication that the child's doctor has prescribed. School staff cannot administer 'over-the-counter' medication. *Note: Medicines must be kept in the original container as dispensed by the pharmacy.* 

| Part 1 – To be completed by Parent/Carer   |                            |
|--|----------------------------|
| To the<br>Head Teacher   | School: SHILBOTTLE PRIMARY |
| Child Name: Date of Birth:   |                            |
| Class: Medical Condition:  |                            |
| I wish for him/her to have the following medicine administered by school staff, as indicated below:  |                            |
| Name of Medication:  |                            |
| Dose/Amount to be given:   |                            |
| Time(s) at which to be given:  |                            |
| Means of administration:   |                            |
| How long will the child require this medication to be administered?  |                            |
| Known side effects and any special precautions (please attach details)   |                            |
| I undertake to deliver the medicine personally to the Head Teacher or Medication Coordinator and to replace it whenever necessary. I also undertake to inform the school immediately of any change of treatment the doctor or hospital has prescribed. |                            |
| Name: Si   | gnature:                   |
| Relationship to child:   | Date:                      |