

THE BRECK PRIMARY SCHOOL
Request for child to carry his/her medicine

THIS FORM MUST BE COMPLETED BY PARENTS

If staff have any concerns discuss request with the appropriate healthcare professionals

Child's Name:			
Class			
Name of Medicine:			
To be kept :			
Date:			
Procedures to be taken in an emergency:			
Contact Information			
Name:			
Daytime Phone No:			
Relationship to child:			
I would like my child to keep the above named medicine on him/her for use as necessary.			
Signed:		Date:	
If more than one medicine is to be given a separate form should be completed for each one			

See next page down for form requesting school to administer prescription medication

The Breck Primary School

Parental agreement for setting to administer prescribed medicine :Breck

School will not give your child medicine unless you complete and sign this form.

Date this form completed	
Name of Child:	
Date of Birth:	
Group/Class/Form:	
Medical condition/illness:	
Medicine: Name the medicine is prescribed to on the container	
Name /Type of Medicine (as described on the container):	
Date dispensed:	
Expiry date:	
Date administration to end if appropriate/review date	
Dosage and method eg Oral, inhaled:	
Timing :	
Are there any side effects that the setting needs to know about?	
Self Administration (self administration form to be completed if yes):	YES/NO
Contact Name:	
Daytime Telephone No:	
Relationship to Child:	
Address:	
<ul style="list-style-type: none"> The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to the setting staff administering medicine in accordance with the setting policy. I will inform the setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped. I understand that I must deliver the medicine personally to [agreed member of staff] and accept that this is a service that the setting is not obliged to undertake. 	
Signature(s):	
Date:	
If more than one medicine is to be given a separate form should be completed for each one	