

Parental Authorization and Release Form for the Administration of Prescription Medicines to Students

It is the policy of the Board of Education of the Janesville Consolidated School District that whenever a student should have a prescription medication administered by the school nurse or school med aide, written authorization and instruction must be provided by a parent of legal guardian.

This medication must be checked in at the Nurse Office or with secretaries and cannot be kept in the student's room, locker, or backpack, except asthma inhalers or Epi Pens.

A written note must be sent with the medicine stating the amount of medicine that is in the bottle that is sent to school.

The medication must be in its original container in which it was dispensed by the prescribing physician or pharmacist or in the manufacturer's container. The pharmacist will provide a second container for school if asked.

Any changes must be brought to the attention of the school nurse by a note from the doctor stating the date of change and new dosage. It may be faxed to the school.

Please complete the following and return to the school nurse.

_____ (student's full name) is to be administered the following medication while attending Janesville School.

Name of Medication _____

Administered for (condition) _____

Dosage _____ Time to be given _____

Date medication is to be started _____ continuing through _____

Physician' name prescribing _____

I hereby request the Janesville School District or, its authorized representative, to administer the above medication.

Parent/Guardian _____

Date _____