

St. Joseph School District  
Health Services  
Permission for Non-Prescription Medicine Middle & High School Students

A written request from a parent/guardian for non-prescription (over the counter) medicine, such as Tylenol or Advil (not aspirin), is required in order for medication to be given to middle and high school students. A parent/guardian must complete this permission form and provide the school nurse with the non-prescription pain reliever medication in the original container. A parent/guardian may send the medication to school with the student to be given to the school nurse/school office. Dosage administered will not exceed manufacturer's recommendations unless an order from a physician/authorized prescriber is received with the medication.

The first dose of any new medication (with the exception of Epinephrine/Albuterol nebulizer to be used in an emergency situation) will not be given to students at school. An updated permission form must be signed yearly and kept in the school's health office, in addition this medication will be kept locked in the health office.

School \_\_\_\_\_ Grade \_\_\_\_\_

Student's Name \_\_\_\_\_

Medication \_\_\_\_\_ Dosage \_\_\_\_\_

I hereby give permission for my child \_\_\_\_\_ to receive the above medication at school for minor pain. (Dosage must not exceed manufacturer's recommendation).

Date \_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_

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Please mark your choice:

\_\_\_\_\_ My child has permission to bring medication home on the last full day of school. I have discussed with my student the importance of bringing the medication directly home and the importance of not taking or giving any medication to another student, and I accept responsibility.

\_\_\_\_\_ I prefer to pick up any extra medication by the end of the last day of school.

**\*Any medication remaining after dismissal the last day of school will be discarded.**

Date \_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_

*Revised March 3, 2014*