CYPRESS FAIRBANKS
INDEPENDENT SCHOOL DISTRICT
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# Community Programs
# Parent Request for Administering Medication

Date: _____ Child's Grade: ____ School/Program: _____

I request Community Programs personnel to give my child, _____, the following medication _____.

Dose: _____ Time: _____

Reason: _____ Allergies: _____

Physician Name: _____ Physician Phone: _____

Route (please circle): oral injection rectal inhalation ophthalmic (eye) ear

I understand that:

- The medication is to be furnished by me and brought to Community Programs in the original container labeled with child's name, name of the medication and directions for the time and dosage. Physician's name must be on prescription medication.
- All medications must be delivered to the Community Programs staff by an adult and must be picked up from the program by an adult.
- If there are questions regarding the medication, Community Programs staff may contact me to seek clarification. I may be asked to seek further information from the prescribing doctor.
- Community Programs staff has the right to inform my child's educators on a need to know basis that my child is on this medication unless notified otherwise in writing.
- Medication may not be given at the exact time requested due to program scheduling.
- Medication remaining at the end of the school year shall be taken home by the parent/guardian. Any medication not claimed shall be discarded as recommended by appropriate guidelines and documented in student record.
- Community Programs staff members are not allowed to give a medication sent not in the original container, without a prescription, and cannot give medication by parent's direction if it doesn't match the label.
- Students may not carry their own medication or transport it to/from the campus.

Parent or Guardian acknowledges and consents to all of the above.

_____ _____

Signature of Parent or Guardian Received by (Staff) Date

_____ _____

Parent or Guardian Daytime Phone Number Returned by (Staff) Date

Note: If the medication you request school personnel to administer is deemed excessive or otherwise potentially harmful to the child, medication will not be given and you will be notified of this decision. Injectable medication such as insulin and treatment for allergic reactions will be given only with a physician's written order.