Union County Educational Services Commission

Medication Administration Permission Form

2024 - 2025 School Year

Union County Educational Services Commission requires that all students who need prescription or non-prescription medication (including Advil, Motrin and Tylenol) administered during school hours must, according to State regulation, do the following:

1. Submit the form completed by the physician and signed by the parent/legal guardian to the School Nurse.
2. Deliver medication in original packaging properly labeled by a registered pharmacist to the School Nurse.
3. Immediately notify the School Nurse of changes in dosage, administration or discontinuation of medication.

STUDENT INFORMATION:

_____ _____

Please print name of student *Student's date of birth*

TO BE COMPLETED BY PHYSICIAN:

Medication Name: _____

Dose _____ Route _____ Time/frequency* _____

*Can dose be delayed on field trip until student returns to school? ☐ Yes ☐ No

Reason for dispensing medication: _____

Contraindications: _____

Side Effects: _____

Are there any restrictions? ☐ Yes ☐ No If yes, what and how long _____

_____ _____ _____

Please printed name of physician *Signature of Physician* *Date*

_____ _____

Address *Phone number*

TO BE COMPLETED BY PARENT/GUARDIAN:

I, _____, grant permission for the School Nurse to administer to the abode medication during school hours and agree to notify the School Nurse immediately of any changes.

_____ _____

Parent/Guardian Signature **Date**