South San Antonio Independent School District

Department of Health Services

SHORT TERM
MEDICATION PERMISSION REQUEST FORM

Medication may be given for Ten days with this note. Medication that needs to be given for a longer period must be accompanied by a letter (note) from a Doctor. Long term medication forms are available from the nurse's office. **The following information is needed BEFORE medication can be given at school.**

_____ _____

Student's Name Teacher

	Name of Medication	Dose of Medicine	Medication to be given at these times	Number of Days
#1				
#2				
#3				
#4				

COMMENTS:

X _____ X _____

Parent / Guardian Signature Date

HS-8/10