

Medication Administration

This form must be filled out each school year and returned to the office for your child to receive any medications during school hours. For prescription medications, this form **AND** a signed form from your child’s physician must be filled out prior to the administration of any prescription medication during school hours/school functions each school year.

Non-prescription medications/ointments that may be given to a student on a “as needed” basis for headache, stomachache, pain, sore throat, cough, etc may include, but not limited to: acetaminophen, ibuprofen, Benadryl, Claritin, TUMS, cough drop, topical ointments, etc. We hope that using these medications, as needed, will reduce both absenteeism and student discomfort while in school.

I hereby authorize the designated school staff to supervise and/or dispense non-prescription and/or prescription medication to my child. I further agree to hold the designated person(s) and any/all school district employees harmless in any and all claims arising from the administering of medication at school. This will be effective for the 2025-2026 school year.

Student Name (Print): _____

Date of Birth: _____

Grade: _____

Student’s **medication allergies:** _____

Parent/Guardian Name (Print): _____

Parent/Guardian Signature: _____

Date: _____

Preference for communications (circle one): Email Phone

Medication return at the end of the school year (circle one): Send home Pick up

- Over-the-counter (OTC) medications provided by a parent must be in the original labeled containers or it will NOT be administered.
- All medications must be administered according to labeled directions, unless a signed physician's order states otherwise.
- All medications must be labeled with the student's name.
- Prescription medications must be in the original container with a current pharmacy label that includes: patient name, medication name, dosage, route of administration, frequency, and physician name.
- If the prescription medication needs to be taken at home and at school, have the pharmacy provide another container with a pharmacy label that can be kept at school.
- All medications must be kept in the health office unless a signed physician's order is received for the child to self-carry (valid for inhaler and/or EpiPen only).
- If your child needs to take their medication with anything besides water, it must be provided by the parent.

Have your child's physician fax a **School Medication Administration Order** to 715-652-2836 (Elementary) or 715-652-6322 (MS/HS)