

All Saints' CofE Primary School

Supporting Children with Medial Needs in School The Administration of Prescribed Medication in School

The school will not give your child any prescribed medication unless you complete and sign this form and the Headteacher has confirmed that school staff have agreed to administer the medication and, where necessary have received appropriate training. Please note, unless agreed otherwise, all medication is to be delivered and collected direct from the school office by the child's parent/carer.

DETAILS OF PLIPIL

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Surname	Forename (s)			
Address	Date of Birth			
	Class/Form			
Condition or Illness				
Name of medication (as described on container)				
For how long will your child take this medication?				
Date dispensed				
Full directions for use				
Dosage and amount (as per instructions on container)				
Method of administration				
Timing				
Special storage instructions (explain if medicine should remain in school or return home daily)				
Special precautions				
Side effects				
Self administration				
Action to be taken if pupil refuses to take the medication				

Parental signature:	School Staff signature	
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ALL SAINTS' COFE PRIMARY SCHOOL RECORD OF ADMINISTRATION OF MEDICINE

Child's Name	D.O.B	Class
Name of medicine		

DATE	TIME	ADULT	DOSE	SIGNATURE