

Tacolneston and Morley Primary School Federation

Parental agreement for school to administer medicine

The school will not give your child medication unless you completed and sign this form. We confirm the school has a policy that staff can administer medicine.

(All medicines must be in the original packaging as dispensed by the pharmacy)

Name of school	Tacolneston / Morley Primary School
Name of child	
Date of birth	
Year / Class	
Medical condition	

Name of Medicine	
Expiry Date	
Dosage	
Timing	
Any additional instructions	
Any possible side effects	

Parent / Guardian Name	
Emergency Contact No.	
Relationship to child	

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with the school policy. I will inform the school immediately if there is any change in dosage or timing of the medicine or if the medicine is stopped.

Signature..... Print..... Date.....

Agreed (Headteacher) Date.....

Review date - September 2020