ASPIRATION GROWTH COURAGE

RESPECT

## AUTHORISATION FOR ADMINISTRATION OF STUDENT MEDICATION

DEPARTMENT OF EDUCATION learners first

FORM A: Non-prescription medication – to be completed by Parent/Carer

Student name:			Date of b	of birth:			
School:			Year level:	<del>:-</del>			
NON-PRESCRIBED medication to be given to student during school hours:	cation to be given to	student during sc					
Name of medication	Expiry date	Dose	Route (mouth, nasal spray etc.)	Frequency or Time	Relation to meals or N/A	In original container?*	Student permitted to self-administer?
						Yes / No	Yes / No
						Yes / No	Yes / No
						Yes / No	Yes / No
						Yes / No	Yes / No
						Yes / No	Yes / No
						Yes / No	Yes / No
						Yes / No	Yes / No
I understand that this form provides authorisation for administration, or self-administration (if indicated) of non-prescribed medication to the student named. I understand that I should notify the school IMMEDIATELY if this information changes. *I understand that all medication MUST be supplied in the original container or Webster-pak, and that the school cannot administer medication if it is not supplied in the original container or Webster-pak.	es authorisation for ad e school IMMEDIATELY t the school cannot adr	ministration, or sel ' if this informatior ninister medication	lf-administration (if indinchanges. *I understandnif it is not supplied in t	cated) of non-pre that all medicati he original contai	indicated) of non-prescribed medication and that all medication MUST be supplied in the original container or Webster-pak	on to the stude lied in the orig ak.	ent named. I inal
Parent/Carer Name:			Relationship to s	to student:			
Address:				Phone number:	ıber:		
Signature:				Date:			

Personal information collected on this form is used to provide support services for your child. This will only be used for the primary purpose for which it is gathered, except where authorised or mandated by legislative requirements (e.g. Mandatory Reporting). For further information, contact Learning Services.

