

Union #38 Out-of-School Time Programs

Authorization for Medication Administration

Student Name _____
Parent/Guardian Name _____ Phone _____
Physician _____ Phone _____
Physician address _____
Student Allergies _____
I give permission for unlicensed OSTP personnel, trained in medication delegation, to administer _____ medication, as prescribed by my physician, _____, to _____ (child's name).

I give permission for my son/daughter to self-administer medication. _____ Yes _____ No

Date Parent/Guardian Signature

Medication Authorization - To Be Completed By Physician

Both prescription and over the counter non-prescription medications must be in their original container with directions clearly visible

Medication _____
Dosage Amount (please be specific) _____
Dosage Time _____
Medication Duration: Start Date _____ End Date _____
Diagnosis _____
Possible side effects _____
Special Physician Instructions _____
Other medications student is currently taking _____
Permission given for this student to hold medication and self administer: _____ Yes _____ No

I certify that the above student is under my care and that it is necessary to administer the above medication(s) to her/him during program hours. I have provided the student and parent/guardian with all appropriate information concerning the use and possible side effects of this medication.

Date Physician's Signature

To Be Completed By Parent/Guardian

As parent/guardian, I give my consent for the above medication(s) to be administered to the above named student in accordance with the foregoing instructions. I authorize staff to assist with administering said over the counter or prescription medication. I have been informed concerning use and effects of the medication, and I hereby release, indemnify and hold Union #38 School District/ Out-of-School Time Program employees and agents concerning any liability, which may arise in connection with the administration of this medication(s).

Date Parent/Guardian Signature

Union 38 School District/ Out-of-School Time Program reserves the right to reject any requests that they cannot effectively handle or which presents undue risks.