

Medication Release Form

West Branch Community School District needs your written instructions before a child can receive any medication at school including over the counter medication. Any medication given at school will be administered by the school nurse or appropriate personnel who have taken a medication administration exam.

All medication must be in the original labeled container. If the medication is prescribed by a physician, the pharmacy label must be on the container with the students name, physician's name, medication name, dosage, and time to be administered.

Date_____ Name of child_____

Name of medication_____

Dosage_____ Time to be given_____

Length of time child will be taking medication at school_____

Purpose of medication_____

Any special instructions_____

This information may be made available to appropriate personnel: Yes/No

Doctor's Signature_____

Parent's Signature_____

School Nurse's Signature_____