



Langley Park
Primary Academy

MEDICINES TO BE TAKEN WHILST IN SCHOOL

The academy is unable to administer medication unless you complete and sign this form.

The Principal has agreed that school staff can administer medication prescribed by a Doctor / Hospital, but this is a service which the school is not obliged to undertake.

Child's Name: _____ Class: _____

DOB: _____

MEDICATION

Nature of illness: _____

Name of Prescribed Medicine
(as described on container): _____

Self Administration by pupil: **YES / NO**

FULL DIRECTIONS FOR USE

How much to give (i.e. dose): _____

What time: _____

DECLARATION BY PARENT

I undertake to supply the school with medicines in properly labelled containers.

I understand that I must deliver the medicine personally to a member of staff and accept that this is a service which the school is not obliged to undertake.

Signature of Parent/Guardian

Date

Please turn over

