HCS 5TH-12TH GRADE MEDICATION PERMISSION FORM

- A parent or guardian, at least 18 years of age must bring the medication to the nurses'
 offices. Medication must be in the original packaging with the prescription if applicable.
- The school nurses are not able to administer herbal or homeopathic medications.

Please give to (Student Name) medicine(s):		in	(grade) the following
Medicine	Dose	Time	
Medicine	Dose	Time	
The medicine(s) should be given	today only uni until further notice _		
Signature	Date		
***Students may transport non-control statement granting permission is provistudent to carry medicines home at the home with students and must be pick.	vided. Your signature be ne end of the school year ed up.	low will indicate	that you would like your stances will not be sent
	lation		
 A parent or guardian at least 18 offices. Medication must be in t The school nurses are not able Please give to (Student Name)	he original packaging to administer herbal o	with prescription in the prescription of the p	on if applicable. medications.
medicine(s):	Door	Timo	
Medicine			
Medicine The medicine(s) should be given		il prescription is	completed
Signature		Date	
***Students may transport non-contr statement granting permission is pro- student to carry medicines home at th home with students and must be pick	olled medications home vided. Your signature be ne end of the school year	at the end of the low will indicate	e year <u>IF</u> a written that you would like your
Sig	nature		