

River Valley Charter School

Field Trip Medication Administration

It is the policy of the school health office for all students requiring medication while on a field trip to complete a medication permission form for any medication to be administered. Medications will only be dispensed in the original prescription container, properly labeled with specific dispensing times.

My child _____ receives prescriptions/OTC (over the counter) medication during the day. I give permission for the delegated teacher, staff, or nurse to administer to my child the medication listed below during the field trip on _____.

<u>Medication</u>	<u>Dose</u>	<u>Time of day to be given</u>
-------------------	-------------	--------------------------------

1.

2.

3.

4.

5.

Name of parent/guardian: _____

Signature of parent/guardian: _____

Date: _____