



Catherine McAuley
Catholic College
MEDOWIE

REQUEST TO ADMINISTER MEDICATION (Casual Basis)

(To be complete by parent/guardian)

I..... request that my son/daughter
in Yearbe allowed to take medication at school under adult supervision according to my
instructions listed below.

Medication must be supplied with a chemist's label attached with your child's name and dosage required.

I accept and agree to observe the conditions imposed by the school and understand and agree that it
is my responsibility to inform Student Services of any changes involving the administration of the
medication. Please turn page over to read the College procedures which must be followed regarding
student medications.

Signed:.....Date:.....
(Parent/Guardian)

Medication to be administered during school hours

Student Name: Year:

Commencement Date:

Office use only	Received by:	Date:	Time:
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Name of Medication	Dosage	Time/s of Administration	Special Instructions

Phone Authorisation:	Permission given by: Received by:..... Date: Time:.....
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Medication

The following procedures must be followed with student medications at the College:

- All medication is kept in Student Services for administration to students. This includes both prescribed and non-prescribed medication.
- The Administration Office requires a Request to Administer Prescribed Medication - Form 1 and a Medical Practitioner Advice to School - Form 2 to accompany prescribed medications. These forms are available to collect from the front office or parents can request a copy to be emailed.
- Any over the counter medications (including Nurofen, Panadol etc) must be accompanied by a completed Request to Administer Medication (Casual Basis) form from a parent with instructions for use. This form is available to collect from the front office or parents can request a copy to be emailed. The medication must be supplied with a chemist's label attached with your child's name and dosage required.
- **Panadol and Nurofen will not be administered to students unless they have supplied their own medication and completed a Request to Administer Medication (Casual Basis) form.**