



Riccall Community Primary School
Parental Agreement for Riccall School to administer prescribed medicine



At Riccall School, we are only able to give your child prescribed medicine once you complete and sign this form. We are not permitted to give your child non-prescribed medicine e.g. Calpol

Name of child	
Date of birth	
Class teacher	
Name and strength of medicine	
Expiry date	
How much to give (dose)	
When to be given	
Any other instructions	
Number of tablets/ quantity given to school	
Special precautions	
Are there any side effects that the school needs to know about?	
Procedures to take in an emergency	
Time & dosage last administered	

Note: Medicines must be in the original container as dispensed by the pharmacy

Contact Details

Name	
Daytime contact no	
Relationship to child	
Name & phone no of GP	
Agreed review date to be initiated by Headteacher	

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to Riccall School staff administering medicine in accordance with the school policy. I will inform school, in writing, if there is any change in dosage or frequency of the medication or the medicine is stopped.

Signature.....

Name.....

Date.....