AUTHORIZATION FOR NONPRESCRIBED MEDICATION OR TREATMENT
(SECONDARY VERSION)

To the Parent:

THE FOLLOWING INFORMATION IS NECESSARY FOR ANY STUDENT TO USE NONPRESCRIBED MEDICATIONS IN SCHOOL. ALL SPACES MUST BE COMPLETED. PLEASE PROVIDE THE SCHOOL WITH AN UNOPENED BOTTLE.

__________________________           __________________________
Name of Student               Address

__________________________      __________________________
School                        Class/Grade

A. I am requesting permission for my child named above to use or receive the following over-the-counter medication(s).

____________________________________________________________________________________________

Medication: Dosage: As directed on the bottle if anything more a License Prescriber statement must be completed. If less amount please indicate: ________________________________________________

B. I will assume responsibility for safe delivery of the medication to school.

B. I will notify the school immediately if there is any change in the use of the medication or the prescribed treatment.

C. I release and agree to hold the Board of Education, its officials, and its employees harmless from any and all liability foreseeable or unforeseeable for damages or injury resulting directly or indirectly from this authorization.

__________________________
Signature of Parent

__________________________      __________________________
Date                          ________________

__________________________________________     __________________________
Home Telephone               Work Telephone

AUTHORIZATION FOR STAFF

The following staff members are authorized to administer the above-non-prescribed medication(s)/treatment(s): Employees of the Board who are licensed health professionals or who have completed the district’s drug administration training program.

__________________________
Director

8/09  8/15/11

11/20/2015

The Wayne County Schools Career Center complies with Title II, Title VI and Title VII of the Civil Rights Act of 1964, Title IX of the Education Amendment of 1972, Section 504 of the Rehabilitation Act of 1973, Americans with Disabilities Act, Age Discrimination in Federal Assisted Program Act, and the Genetic Information Non-discrimination Act of 2008 in its policies and practices of non-discrimination and harassment against students and employees on the basis of religion, race, color, national origin, sex, disability, military status, age, or genetic information in its programs, activities, or employment.