

**BRITTEN SCHOOL  
AUGUST 2016-AUGUST 2017**

**OVER-THE-COUNTER MEDICATION ADMINISTRATION  
PERMISSION FORM**

**Student's Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_

This form must be filled out, signed by parent/guardian and placed on file to indicate **every over-the-counter medication** that needs to be administered at school.

I request school personnel to supervise the administration of over-the-counter medication for my child. The medication must be dispensed from the original bottle and must be replenished in a timely manner. It is understood that Britten School faculty members are administering medicine to my child in compliance with my request. Accordingly, I hereby release Britten School and personnel from any and all liability as to injuries or ill effects of any kind that may be caused thereby.

<b>Time of medication 1</b> _____					
<b>mg:</b> _____	<b>time taken:</b> _____ AM/PM	<b>mg:</b> _____	<b>time taken:</b> _____ AM/PM	<b>mg:</b> _____	<b>time taken:</b> _____ AM/PM
<b>Time of medication 2</b> _____					
<b>mg:</b> _____	<b>time taken:</b> _____ AM/PM	<b>mg:</b> _____	<b>time taken:</b> _____ AM/PM	<b>mg:</b> _____	<b>time taken:</b> _____ AM/PM
<b>Time of medication 3</b> _____					
<b>mg:</b> _____	<b>time taken:</b> _____ AM/PM	<b>mg:</b> _____	<b>time taken:</b> _____ AM/PM	<b>mg:</b> _____	<b>time taken:</b> _____ AM/PM
<b>Time of medication 4</b> _____					
<b>mg:</b> _____	<b>time taken:</b> _____ AM/PM	<b>mg:</b> _____	<b>time taken:</b> _____ AM/PM	<b>mg:</b> _____	<b>time taken:</b> _____ AM/PM

**\* Please note: This sheet and all other medication sheets (data and permission) on file for this student will no longer be valid if any information changes (medication, dosage, and/or time of day when the medication is taken). A completely new set of Student Medication Information Data sheets and Medication Administration Permission Forms must be filled out each time there is a medication change.**

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date