



Prescription Medication Authorization Form

All prescription medications must be in their original container. The container must state the patient's name, the name of the medication, the dose to be administered, and the name of the prescribing physician. Medications prescribed or requested to be given three times a day or less will not be given at school unless the physician prescribes a specific time that falls during school hours. The Banff School will not administer herbal medications, home remedies, or dietary supplements unless accompanied by a doctor's note. Such medications must also come to school in labeled, original containers.

No school employee may be held responsible if the child does not receive his scheduled dose of medicine or if the child takes an overdose of medicine. If the daily dose of medicine is lost, stolen, spilled, or if the child refuses to take it or spits it out, a reasonable attempt shall be made to reach the parents. If the parents cannot be reached, the school personnel shall not be held responsible. These particular situations shall be documented and signed by the staff member involved.

All medication and medical equipment are kept in the school office and must be picked up by the parent / legal guardian before the last day of the school year. ALL remaining medications will be discarded after this date.

Student Name: _____

I request The Banff School staff to give the following medications to my son or daughter:

name of medication

using the following dosage: _____
dosage

at the following days and times: _____
frequency

This medication is to be administered from: _____ to _____
Start date *End date*

Signature of parent or guardian

Date

Cell Phone

Home Phone

PLEASE NOTE: If the medication you request school personnel to administer is deemed excessive or otherwise potentially harmful to the student, medication will not be given and the parents will be notified of this decision by the principal.