REDDING SCHOOL OF THE ARTS COLUMBIA SCHOOL DISTRICT

AUTHORIZATION FOR MEDICATION REQUIRED DURING SCHOOL HOURS

California Education Code #49423 allows the school nurse or other designated school personnel to assist students who are required to take medication during the school day. This service is provided to enable the student to remain in school to maintain or improve the potential for education and learning.

Medication must be in the container in which it was purchased with the pharmacy label attached. It must be prescribed for the student to whom it will be administered. No medications (including over-the-counter medications) will be given at school without a current prescription from a California licensed physician.

Student Name:	Grade:	
School:		

TO BE COMPLETED BY HEALTH CARE PROVIDER:

Date Student Examined:			
Diagnosis:			
Medication Prescribed:			
Dosage:	Time:	Route:	
Medication Administered Until:			(date)
The student will need to carry this med	dication on his/her person: _	Yes	No
It is necessary for this medication to a above. The medication may be admini) indicated
Physician Signature:		License No.	<u> </u>
Physician Name (please print or stamp	o):		
Address:	Phor	ne:	

TO BE COMPLETED BY PARENT/GUARDIAN:

I authorize school personnel to administer the above medication to my child as ordered by the physician listed above. I understand that this medication may be administered by medically untrained school personnel.

Parent/Guardian Signature:_	Date:	
Home Address:		
Daytime Phone Number(s):_		

This form must be renewed every 12 months or whenever the prescription changes.