Student Name _____Grade_____Allergies_____

Bow Elementary School

The New Hampshire Board of Education policy Ed 311.02 regarding the taking of medication at school requires:

1. Any student who needs to take medication during the school day shall be assisted by the School Nurse or member of the school staff as designated by the building Principal.

2. All prescribed medication must have an order from the medical provider on file in the health office, along with a permission to take medication from his/her parents/legal guardian.

3. All medications must be in their original labeled containers from the pharmacy. Medications will be delivered to and from health office by a parent/legal guardian or responsible adult. This applies to both prescription and non-prescription medications. Students **CANNOT** bring medications to the school.

Please fill out the following information:

Student___ _____ Diagnosis/condition _____

Medication _____

Dose _____ Frequency _____ Route of Administration _____

Times to be given at school _____ Start date_____Stop date_____

Provider Signature _____Date _____

Provider Name (print) _____Provider contact number_____

Parent/Guardian Authorization:

I request and give permission for the school nurse or a designated member of the school staff to assist my child in taking the above medication and release said person from responsibility for any adverse effects from this medication.

Signature of Parent/Guardian _____ Date_____

Last revised 08/19