

**RAYMOND SCHOOL DISTRICT**



**PRESCRIPTION MEDICATION DURING SCHOOL DAY**

- (a) Any pupil who is required to take during the school day a medication prescribed by a licensed physician, advanced registered nurse practitioner, or licensed physician's assistance, shall be supervised in taking medication by the school nurse, who shall be responsible for administering the medication.
- (b) If the school nurse is not available, the following option shall apply in implementing the above:  
The building principal or designee may assist students in taking required medications by making such medications available to the student as needed; and by observing the student as he/she takes or does not take his/her medication.

<b>PHYSICIAN'S STATEMENT</b>	
<hr/>	<hr/>
(student's name)	(medication/dosage/route)
For <hr/>	Please administer at <hr/> for <hr/>
(diagnosis)	(time) (# of days)
Additional Information <hr/>	
Physician Name <hr/>	Physician Signature <hr/>
Address <hr/>	Phone <hr/>
Date <hr/>	

**PARENT OR GUARDIAN AUTHORIZATION**

I hereby give my permission to have the school nurse administer the above listed medication and/or the principal or his/her designee assist the student with the taking of his/her medication.

Please list all other medications and/or medical conditions:

Parent/Guardian Name 

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Parent/Guardian Signature 

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Phone 

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 Date 

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