

SIGNAL HILL SCHOOL
33 SIGNAL HILL DRIVE
VOORHEES, NJ 08043

Phone: 856-767-6749 Ext.1161

Fax: 856-767-6221

To: Parent/Guardian

From: School Nurse

Re: Administering Medication to Students at School

If your child needs medication at school, this form must be completed and filed in the school health office. This form is based upon Policy and Regulations 5330 adopted by the Voorhees Board of Education.

Child's Name_____

Child's Grade_____

Name of Medication_____

Purpose of Medication_____

Time to be Administered_____

Dosage_____

Possible side effects_____

Termination Date for Administering Medication_____

_____ *This medication may be withheld on a school field trip if a*
(Physician Initials) *nurse or parent is not available to attend.*

Signature of Parent/Guardian

Physician Stamp

Signature of Physician

Date

Medication at School:

The nurse is only permitted to give medication prescribed by the physician, this includes prescription and over the counter medication. The medication must be brought to school by a parent in its original container. This is for the safety of your child and the other school children.