**Parent/Guardian Permission**

**To Assist with Medication to a Student on a Field Trip**

**PLEASE BRING THIS FORM WITH YOU TO THE SCHOOL WITH MEDICINE (IN THE ORIGINAL CONTAINER) PLACED IN A CLEAR PLASTIC BAG LABLED WITH YOUR CHILD’S NAME**

School **PS DUPONT MIDDLE SCHOOL**

I give my permission \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to go on

The field trip to **WASHINGTON DC** . I understand that a staff member will assist my child with his/her medication. Information about the medication that needs to be taken by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is as follows:

Please complete this for over the counter medication also:

Name of Medication \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dosage (amount to be taken) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Time(s) to be taken \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How medication is to be taken \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I understand that I ***must*** send the medication in the original container.

The following are any allergies or health problems my child has:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I further understand that my signature below fully and completely waives any claim for liability that may exist against any staff member resulting from the assistance with medication to my child.

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please contact your school nurse if you have any questions relative to the above agreement.

HOW TO DELIVER MEDICATION

Prior to the trip:

1. Fill out the form for medication. You can use the same form for multiple medications.
2. Put your medicine in a clear plastic baggie leaving the meds in the original container
3. Place your name in non-erasable ink on the outside of the bag.
4. Fold and place the medical form in the bag
5. Seal the bag.

The morning of the trip:

1. Please look for Mr Prokop on the morning of the trip.

2. Hand-deliver the plastic bag.

These medications can be carried by the student while on the trip, however; the form should be presented to Mr Prokop.

Epipen

Inhaler

 Diabetic kit