



MILLBROOK COMBINED SCHOOL & NURSERY

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<http://learning.millbrook.bucks.sch.uk>

email - office@millbrook.bucks.sch.uk

Charity Registration Number: 1103983

Headteacher • Miss D Mansfield

Aiming for Excellence - Learning for Life

Request for the administration of medication

This form must be completed by a parent/guardian - please note that it is the decision of the Headteacher whether school staff can administer the medication

NB: Any medicine given to pupils must be entered on the log sheet in the first aid room

Pupil's full name:		Class:	
Condition or illness:			
Name/type of medicine:		Dosage :	
		Time:	
Storage of medicine:		Date dispensed:	Prescribed expiry date:
Procedures to be taken in an emergency:			
Doctors details			
Name of GP/Dentist or other:			
Surgery name and address:			
Telephone Number			

I understand that I am responsible for collecting the medicine at the end of the school day; and that the medicine will not be handed to my child or their siblings to take home. In completing the form I am giving my consent for my child to be administered medicine.

Print Name: Relationship to child

Daytime telephone number

Parent / Carer signature Date

For school use only

Administered by signed		Date	
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