

Authorization for Administering Medication/Medical Procedures

Dear Parent/Guardian,

Your written permission is required to administer medication or medical procedures to your child. Any prescription drug or over-the-counter drug sent to the day care facility must be in its original container and must be clearly labeled with your child's name, the name of the drug, and directions for administering the drug. A new authorization form is needed each week.

If it is absolutely necessary for your child to be given medication while at the day care facility, please complete the following information:

Child's name _____ Birth date _____

Parent's name _____ Phone number _____

Name of medication _____ Dosage _____

Purpose of medication _____

Start date _____ End date _____

Time to administer _____

How to administer: orally, topically, etc. _____

Prescription number _____

Time and Date of last dosage given at home _____

Please give my child the above-named medication at the time(s) and in the amount(s) indicated.

Signature of Parent/Guardian

Date

Date	Time administered	Signature of person giving medication
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		