



St Joseph's School, Northam

PO Box 500 Northam WA 6401
Email: admin@sjsnortham.wa.edu.au

Primary Campus: Lance Street ~ Telephone (08) 9621 3500
Secondary Campus: Wellington Street ~ Telephone (08) 9621 3550

Student Medication Request/Record

Where possible, student medication should be administered by the student or be administered by the parent/guardian at home in times other than school hours. As this is not possible in all instances, should the Principal approve school staff to administer prescribed medication to students, the following requirements are to be met.

The doctor prescribing the medication is to be aware that school staff will administer or supervise the administering of medication to students. The doctor is to provide any additional information to staff regarding special requirements that may exist for the administration of the medication.

Prescribed student medication is to be presented to the Principal and should be stored in a container clearly showing the name of the student, the name of the medication, the dosage and frequency.

In the event of my child requiring medical attention, and I am unable to be contacted, I give permission for the Principal (or his elected representative) to seek such assistance.

Parent/Guardian Signature

Date

I, _____ being the parent/guardian of student

_____ request that St Joseph's School,

Northam administer the following medication as prescribed by Dr _____

for the purpose of treating _____ (condition).

Name of medication: _____

Expiry date of medication: _____

Quantity of medication supplied with form:

_____ [checked by Admin Staff : _____]

Dosage to be taken: _____

Time to be taken: _____

Comments:

