

Child Care Facility

Authorization for Prescription and Non-Prescription Medication

No medication shall be given by child care personnel without the signed permission of the parent or legal guardian. All medication must be in the original container with the child's name, name of the physician, medication name, and medication directions written on the label.

Non-prescription medication brought in by the parent or legal guardian can only be dispensed if there is written authorization from the parent or legal guardian to do so.

Medication which has expired or is no longer being administered shall be returned to the parent or legal guardian.

Child's Name: _____			Age: _____		
1. Medication Name: _____					
Amount to be Given: _____		Time to be Given: _____			
Start Date: _____			End Date: _____		
2. Medication Name: _____					
Amount to be Given: _____		Time to be Given: _____			
Start Date: _____			End Date: _____		
Record of Medication Given					
1. Medication Name: _____					
Date and Time	Amount	Employee Signature			
_____	_____	_____			
_____	_____	_____			
_____	_____	_____			
_____	_____	_____			
2. Medication Name: _____					
Date and Time	Amount	Employee Signature			
_____	_____	_____			
_____	_____	_____			
_____	_____	_____			
_____	_____	_____			

This authorization form must be maintained and is only valid for the duration of the prescription.

I hereby give permission to dispense the medication(s) listed above in accordance with the written directions on the prescription label or printed manufacturer's label.

Parent/Guardian Signature

Date