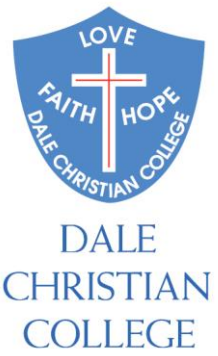


DALE CHRISTIAN COLLEGE
STUDENT MEDICATION REQUEST / RECORD: 2024



Where possible student medication should be administered by parents at home at times other than during college hours. To enable college staff to supervise the administration of Medication to a student, the medication request/record must be signed by the students' parents or guardian.

Medication for administration during college hours should be delivered to Student Services. All medication should be contained in properly labelled containers showing the name of the student, the name of the medication and the appropriate dose and frequency. Unlabelled medication will not be accepted.

Students are not permitted to have in their possession any medication or analgesics without permission from parents and the school.

College staff are not permitted to provide analgesics to students.

Asthma requires specific medication. Please provide daily dosage, frequency and any additional information necessary.

(Please print neatly)

NAME OF STUDENT: _____

ADDRESS: _____

PHONE NO. (MOBILE) _____ (WORK) _____

NAME OF MEDICATION: _____

PERIOD REQUIRED: FROM _____ TO _____

CONDITION TREATED: _____

DOSE TO BE GIVEN: _____

COMMENTS: _____

LIST ANY MEDICATION TO BE KEPT IN POSSESSION OF STUDENT (eg Ventolin)

OFFICE USE ONLY	Initials	Date
Entered into TASS by Student Services		
Filed in student file & teacher notified		

Parent/Guardian
 Name: _____

Signature: _____

Date: _____