The Whartons Primary School
Head Teacher: Mrs Julia Dickson

The Whartons
Otley
West Yorkshire
LS21 2BS
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Parental Agreement for School to Administer Prescribed Medicine

Date from:	Date to:

Name of Child:	Year Group:

Name of Medicine:

Reason for Medicine:

How much to be given:

When to be given:

Any other instructions (ie To be kept in the fridge)

NOTE: Medicines must be in the original container as dispensed by the pharmacy.
The above information is, to the best of my knowledge, as accurate at the time of writing. I give permission for 'The Whartons' staff to administer medicine in accordance with the School's Policy.

Signed by Parent:	Date: