

## **Baldwin-Whitehall School District**

Administration Office: 4900 Curry Road • Pittsburgh, Pennsylvania 15236-1817 Telephone: 412-884-6300 • FAX: 412-885-7802 • Website: www.bwschools.net

Baldwin High School 412-885-7500, Ext. 4 Fax: 412-885-6652 J.E. Harrison Middle School 412-885-7530, Ext. 4 Fax: 412-885-6766 McAnnulty Elementary School 412-714-2020, Ext. 3 Fax: 412-714-2024 W.R. Paynter Elementary School 412-885-7535, Ext. 3 Fax: 412-885-6641 Whitehall Elementary School 412-885-7525, Ext. 3 Fax: 412-885-7559

## **AUTHORIZATION FOR ADMINISTRATION OF OVER-THE-COUNTER MEDICATION AT SCHOOL**

(Permission for use of inhalers and prescription medication is on separate forms.)

Student Name:		Birth Date:				
School:	School Year:				Grade:	
Medication Condition	Medication	Strength	Dose	Time	Route	Possible Side Effects
1.						
2.						
3.						
4.						
7.						
5.						
	·			•		
	Do	vent/Cuerdier	Authoriza	stion		
	Pal	rent/Guardiar	i Authoriza	ltion		
1. I request that the			_			
2. I release school predication(s).	personnel from l	iability in the eve	ent adverse r	eactions r	esult fron	n taking the
3. I give permission for the school nurse to communicate with the student's teachers about the student's						
health condition(s) and the action of the medication(s).						
Р	arent/Guardian S	gnature		<del>_</del>		Date

NOTE: Medication is to be supplied in the original bottle.