



# Infant Jesus School

17 Smith Street, Morley, Western Australia 6062  
Phone: 9276 1769 Fax: 9276 2998  
admin@infantjesus.wa.edu.au www.infantjesus.wa.edu.au

## Infant Jesus 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, before the Principal approves school staff to administer prescribed medication to students, the following requirements must be met.

1. The doctor prescribing the medication is to be aware that school staff will administer or supervise the administering of medication to students.
2. The doctor is to provide in writing any additional information to staff regarding special requirements that may exist for the administration of the medication.
3. The doctor should provide in writing all information of any side effects 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.

I \_\_\_\_\_ being the parent/guardian

of student \_\_\_\_\_ request that Infant Jesus School  
(Name)

administer the following medication as prescribed by Dr \_\_\_\_\_

for the purpose of treating \_\_\_\_\_  
(condition)

Medication: \_\_\_\_\_

Dose: \_\_\_\_\_

Time to be taken: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

(Signature of Parent/Guardian)

Notes:

1. **The Doctor's written information should be attached.**
2. **Any additional relevant information should be attached.**