



Escuela Viva Medication Authorization Form



Child's Name: _____ Date: _____



Office of Child Care Regulations Regarding Medicine

No prescription medication or non-prescription medication including but not limit to pain relievers, sunscreen, cough syrup, diapering and first aid ointments, or nose drops, may be given to a child except under the following conditions:

- A signed, dated, written authorization by the parent who is on file.
- Prescription medication is in the original container and labeled with the child's name, name of drug, dosage and directions for administering, date and physician's name.
- Non-prescription medication is in the original container, labeled with the child's name, dosage, and directions for administering: and
- A written record of all medications administered listing, as a minimum, the name of the child, type of medication, the signature of the person administering the medication, date, time and dosage given, shall be kept.
- All medications shall be secured in a tightly-covered container with a child-proof lock or latch and stored so that they are not accessible to children.
- Medications requiring refrigeration shall be kept in the refrigerator in a separate tightly-covered container with a childproof lock or latch, clearly marked medication.
- Parents shall be informed daily of medication administered to their child.

I authorize **Escuela Viva Staff** to dispense this medication in accordance with the administration information.

Parent(s) Name(s): _____

Parent(s) Signature(s): _____

Date: _____

