



St. Dominic Catholic School

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**St. Dominic School  
Medication Administration Form**

**If it is absolutely necessary for your child to take medication during school hours, please note the following:**

1. Medication Administration Form must be completely filled out by parent/guardian.
2. It is the parent/guardian's responsibility to bring the written request and medication to school.
3. Medication must be in the original prescription bottle.

Student Name \_\_\_\_\_

Medication \_\_\_\_\_ Dosage \_\_\_\_\_

Time medicine should be taken \_\_\_\_\_

Special instructions \_\_\_\_\_

Anticipated length in days that medication will be needed \_\_\_\_\_

\_\_\_\_\_  
Parent/guardian signature

\_\_\_\_\_  
Date